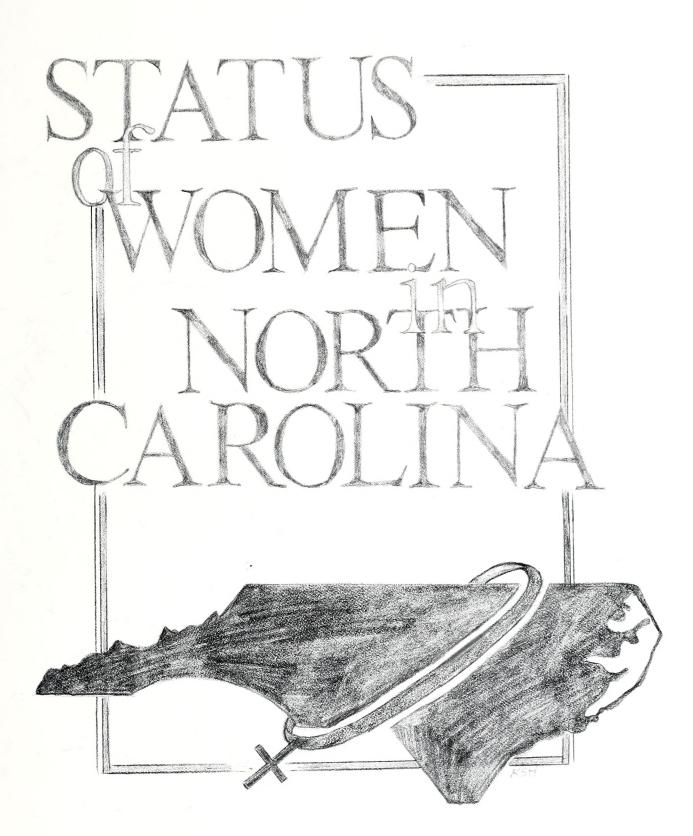
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The Status of Women in North Carolina

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1994

James B. Hunt Jr., Governor State of North Carolina

Katie G. Dorsett, Secretary N.C. Department of Administration

Juanita M. Bryant, Executive Director N.C. Council for Women

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North Carolina Department of Administration

James B. Hunt Jr., Governor Katie G. Dorsett, Secretary

N.C. Council for Women Juanita M. Bryant, Executive Director

December 1994

The Honorable James B. Hunt Jr. Office of the Governor State Capitol Capitol Square Raleigh, North Carolina 27601-2905

Dear Governor Hunt:

On behalf of the North Carolina Council for Women, it is my pleasure to announce the release of the 1994 report The Status of Women in North Carolina. This publication is the most comprehensive study of eight major policy areas affecting women's lives since the release of the status report researched and compiled by this office in 1975.

The 1994 report is based primarily on statistical comparisons and analysis of 1980 and 1990 data collected from the U.S. Department of Labor, Bureau of the Census, and other, more recent data. As policy-makers are beginning to understand, addressing one issue of concern to women demands that interrelated issues also be researched. This report examines the eight areas of greatest impact on the lives of North Carolina women and their families.

It is the intent of the North Carolina Council for Women that this report be used as an educational and research tool to better understand the challenges faced by women and their families. The report will hold increasing historical value in coming years - both as a portrait of the past and as a measuring stick of progress for the future.

It is the goal of the North Carolina Council for Women to empower and enable women to overcome the challenges they currently face. It is my greatest hope that the next publication of this report will announce that all of the challenges researched herein have been met with unqualified success, that the status of women in North Carolina is no longer an issue, and that the picture ahead is brighter as we move into the 21st century.

Sincerely,

M. Bryant



Executive Director's Challenge

On the eve of the 75th anniversary of women's suffrage, we are forced to ponder the accomplishments of our sex during the 20th century. We are asking the question "What is the status of women in 1994 and how much progress have we made as a society?"

The publication of this report reveals the comparative analysis of the beginning and the end of a particularly tumultuous decade for women with regard to changes in policy and attitude: 1980 through 1990. Based primarily on statistical comparison of the 1980 and 1990 U.S. Bureau of Census data, this report engraves our accomplishments and successes for the coming generations. But it also examines our shortcomings -- what we have not yet achieved. These are the challenges with which we are commissioned for the 21st century.

In the past 10 years, women have made great strides and gained national attention in the political arena with more women than ever going to the polls to vote. The year 1992 was termed "The Year of the Woman" in politics. North Carolina's Eva Clayton won an unprecedented victory when she was elected to the U.S. House of Representatives -- the first African American and the first woman elected to Congress from this state. Women, in fact, currently represent approximately 52.4 percent of the population but only 16 percent of the North Carolina General Assembly, the state's representative legislative body. Inequities exist in academics as well. More women than men enroll in higher education, but there are fewer female high school principals and professors. Social biases and "pre-programming" still steer females to excel in areas other than academics, which limits their options in pursuing careers and ultimately limits their earning potential. Bottom line: North Carolina women continue to earn, on average, 68 cents to every dollar a man earns. Addressing women's health concerns is becoming more expedient as medical science enables us to live longer. Family and medical leave policies are becoming crucial as more middle-aged women become the "sandwich generation." We have made many strides, but we have a long way to go.

The publication of this status report is a landmark event. Not only will it serve as a reference for educators and researchers of women's concerns, it is a written testimony to historians, policy-makers and lay persons on the status of women and their families in

today's society. In fact, the North Carolina Council for Women has developed position papers based on many of the recommendations within this report.

On behalf of the North Carolina Council for Women, I challenge the readers of this publication to carefully study the statistics and assign faces to them -- they are our mothers, sisters, daughters, colleagues and friends. We must collaborate, develop innovative strategies and eradicate the problems raised in this report. My challenge to you is this: The next status report will reveal all the issues herein have been addressed and women have achieved significantly greater equity in our society.

Juanita M. Bryant Executive Director N.C. Council for Women

Acknowledgments

The North Carolina Council for Women wishes to thank the many people who helped make this comprehensive report on the status of women in North Carolina possible. We are most grateful to our five interns: Tammy Woodard, Erin Tracy, Chet Mottershead III, Rachel Neerman and Kim Holmes, who spent many hours gathering data, creating charts and graphs and drafting many of the sections. Members of the staff - Elaine S. Monaghan, special projects director and coordinator of the project, Peggy Alexander, Joyce Allen, Connie Hawthorne, Patricia Alston, June Kimmel, Catherine Rieger and Melanie Wade deserve our appreciation for many hours spent writing, revising and typing the drafts. Thank you also goes to Sara Arnold and Charlotte Johnston for computer input and to Felicia Lewis for editing services. Grateful acknowledgment goes to the Mary Duke Biddle Foundation whose generous support made publishing this report possible. The council also wishes to acknowledge the recommendations and technical assistance received from the advisory committee:

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Introduction to Status Report

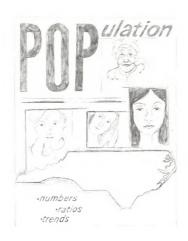
As we approach the close of the 20th century and move with high promise and expectation toward the beginning of the 21st century, the time appears appropriate for examining the status of women in North Carolina. In our role of continuing the education of the citizens of this state, the North Carolina Council for Women has collected and prepared data to provide a current profile of North Carolina women. *The Status of Women in North Carolina* is a statistical snapshot of the state's women. Information within the report covers population, education, employment and health concerns of North Carolina women of all ages and cultural heritage. Additionally, an overview of the economic status of women is inherent within this examination.

The 1990 census, along with data from North Carolina state agencies, serves as the basic source of statistical information. Our focus on the numbers within this examination provides a quantitative representation of the quality and economics of women's lives. Because our emphasis is women, we have not included the two other categories central to our totality, men and children, except where the information sheds light on the condition of women.

It is important to note that snapshots do not tell everything, but they can be compared with earlier and later pictures to reveal a historical portrait of the North Carolina woman.

It is our hope that this report will

- demonstrate the critical need for broader documentation of women's lives,
- provoke further study into these issues,
- reflect areas needing improvement, and
- establish the priorities that will best advance women in North Carolina.



Women and Population

The 1990 census reports that 51.5 percent of the population of North Carolina is female. This percentage represents 3,414,347 women. Since the 1980 census, the state's population has grown 13 percent; however, the ratio of females to males is unchanged. Therefore, based on past and current growth, the projected population for females for the year 2000 is 3,792,472.

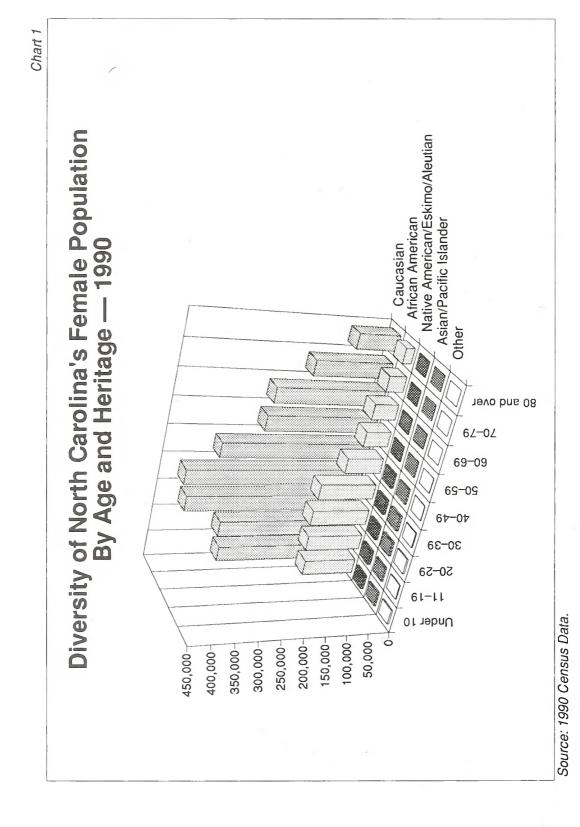
The largest increase in the female population since 1980, 52 percent, is in the category of women age 75+. Baby boomers continue their journey through the population pyramid, swelling the ranks of persons age 35 to 49 by 42 percent. The number of those under 5 years old increased from 1980 by 14 percent. Only the 5-to-19 age group experienced a decline, which was 7 percent.

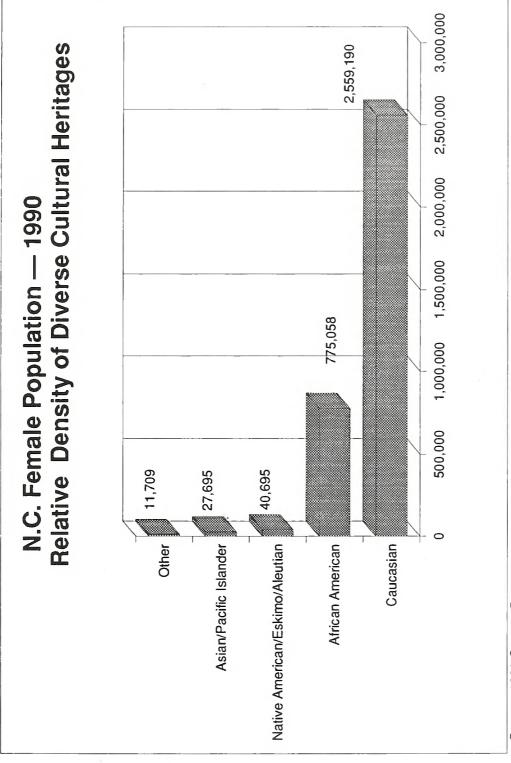
Table 1. Diversity of Population in North Carolina - 1990

Racial Characteristic	Percentage of Total Population
Caucasian	75.6
African American	22.0
American Indian/Eskimo or	
Aleutian	1.2
Asian or Pacific Islander	0.8
Other Race	0.5

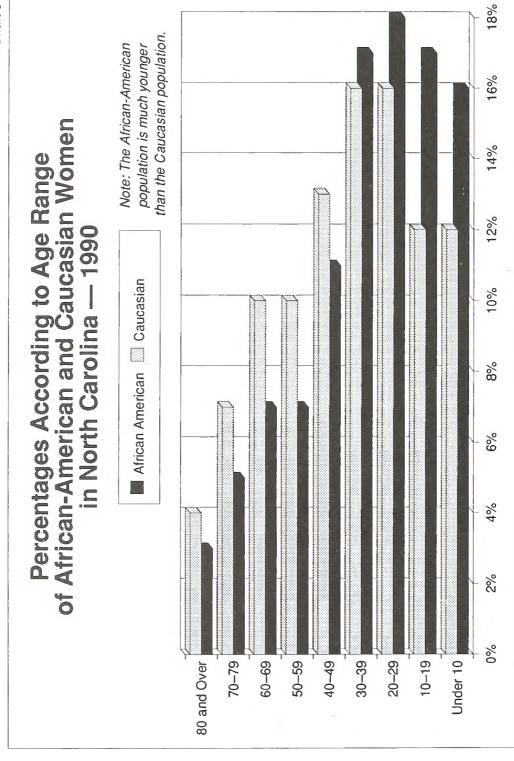
Source: U.S. Department of Commerce, Bureau of the Census.

The three charts (Charts 1, 2 and 3) on the following pages graphically illustrate the diversity of the state's female population.





Source: 1990 Census Data.



Marital/Household Status

The United States census reports that the 10-year decline in marriage rates accelerated in 1991. One in four Americans age 18 and older had never married in 1991, compared to one in six in 1970. Nationally, the marriage rate has decreased from 10.6 to 9.4 per thousand population.² The census reveals that the baby boom generation is not marrying at the same speed that its parents married.

North Carolina mirrors the nation's marriage rate decline with a total of 9.5 per 1,000 population in 1970, falling to 7.7 in 1991. In 1991, 48,754 couples married.³ The state's divorce rate increased from 2.7 per thousand population in 1970 to 5.0 in 1991.

Table 2. North Carolina Households - 1990

Type of Household ¹	Number	Percent
One-Person Family	596,959	
Female householder	359,191	60.0
Male householder	237,768	40.0
FAMILY HOUSEHOLD	1,812,053	100.0
Married-Couple Family	1,424,206	78.6
with related children ²	667,611	36.8
with no related children	756,595	41.8
Other Family		
Female Householder with No Husband Present	309,876	17.1
with related children	201,917	11.1
with no related children	107,959	6.0
Male Householder with No Wife Present	77,971	4.3
with related children	39,752	2.2
with no related children	38,219	2.1
NON-FAMILY HOUSEHOLD	704,973	100.0
Female householder	402,117	57.0
Male householder	302,856	43.0

Source: U.S. Department of Commerce, Bureau of the Census.

¹ Households are classified by type according to the sex of the householder and the presence of relatives. Two types of householders are distinguished: a family householder and a non-family

householder. A family householder is a householder living with one or more persons related to him or her by birth, marriage or adoption. The householder and all persons in the household related to him or her are family members. A non-family householder is a householder living alone or with non-relatives only.

Of the over 2.5 million households counted and categorized in the 1990 census, African-American two-parent families decreased by 8.7 percent while Caucasian two-parent families decreased by 2.2 percent when compared with the 1970 figures.

In North Carolina, 179,906 families live in poverty -- 9.9 percent of all families. Women head 93,929 (52.2 percent) of these poverty-level income households. Also, 128,082 families with children live in poverty, and 81,111 (63.3 percent) of these are headed by women.

Table 3. Marital Status of Female Population in North Carolina 15+ Years Old - 1990

Marital Status	Number	Percent
Never Married	603,374	21.9
Now Married, Except Separated ¹	1,477,434	53.5
Separated	103,674	3.8
Divorced	223,816	8.1
Widowed	352,110	12.8

Source: U.S. Department of Commerce, Bureau of the Census.

Various imperatives should govern decisions in North Carolina since the population includes almost as many unmarried as married women. Everything from health care risk analyses to state support for child care facilities must take not only the married household, but the single parent/single adult household into consideration as well.

² "Related children" in a family include own children and all other persons under 18 years of age in the household, regardless of marital status, who are related to the householder, except the spouse of the householder. Foster children are not included since they are not related to the household.

^{1 &}quot;Now Married, Except Separated" includes persons whose current marriage has not ended through widowhood, divorce or separation. The category may also include couples who live together or persons in common-law marriages if they consider this category the most appropriate.

Endnotes

- 1. U.S. Department of Commerce, Bureau of the Census, 1990 Census of the Population and Housing, STF 3, Washington: 1990.
- 2. U.S. Department of Commerce, Bureau of the Census, 1990 Census of Population and Housing, STF 3, Washington: 1990.
- 3. N.C. Department of Environment, Health and Natural Resources, State Center for Health Statistics, *Vital Statistics* 1991, pages. 1-8. Raleigh: 1991.



Women and Education

The educational attainment of North Carolina citizens is gradually increasing. Growing numbers of women, following the trend of the total population, have attained four years of high school and four years of college. The improving educational picture is across the board, including women and men and all races.

Table 4. Educational Attainment in North Carolina - 1990, 1980, 1970

Proportion of Persons With At Least Four Years of High School

Year	Total	%	%	%	%
	Population	Males	Females	Caucasian	African
	25+	25+	25+	25+	American
					25+
1990	70.0	69.6	70.2	79.1	52.8
1980	54.8	55.1	54.6	57.8	43.0
1970	38.5	19.9	23.1	42.2	22.9

Source: U.S. Department of Commerce, Bureau of the Census.

Proportion of Persons With At Least Four Years of College

Year	Total Population 25+	% Males 25+	% Females 25+	% Caucasian 25+	% African American 25+
1990	17.4	19.3	15.7	19.3	9.5
1980	13.2	15.4	11.3	14.7	7.3
1970	8.5	5.6	5.5	9.4	4.3

Source: U.S. Department of Commerce, Bureau of the Census.

A report released by the American Association of University Women (AAUW) documents how the public school systems are especially underserving the education of girls. The report, "How Schools Shortchange Girls," asserts that gender bias in the classroom, while not as salient as it was 20 years ago, still exists and prevents girls from achieving and exploring academic options. This system, in fact, teaches girls to be passive and dependent. There are many studies that indicate females are gender-stereotyped at an early age.

In July of 1983, the North Carolina Assembly on Women and the Economy published a report titled "Issues and Opportunities." The report identified a direct link between women's educational attainment and their economic status. If women are not encouraged or provided the opportunity to further their education and training, the potential for economic problems exists. In 1991, 62,533 students graduated from high school in North Carolina. Chart 4 on page 11 titled "1991 North Carolina High School Graduates' Intentions" indicates the plans of those graduates. Forty-three percent of the graduating women planned to go to a public or private college, compared to 37 percent of the men. Similar statistics affected the female and male enrollment in community and technical colleges: 82.8 percent of women said they were going to community colleges, compared to 67 percent of men. Community colleges are the entry point for higher education for many women, young and old. Women represent two-thirds of all community college enrollment. See Table 5 on page 12. Ten percent of the men were planning to enter the military, compared to 1.9 percent of women.

Although more women than men have been enrolled in higher education in North Carolina since 1977, women's economic status has not changed much over the past decade. In 1979, a woman with a college education earned the same amount annually as a man with an eighth grade education. Today, women earn an average of 68 cents for every \$1 earned by men. A woman with a college degree earns only \$900 more than a man the same age with a high school diploma. In an attempt to address the issues facing women, N.C. Equity, at its fall 1992 conference, set its agenda of gender equity in public schools as a priority for legislators in 1993.²

N.C. Equity's Draft Women's Agenda for 1995-1996 recommends the following on gender equity: Prohibit discrimination in the workplace; Establish gender balance in public sector board and commission appointments; Work to eliminate gender bias in North Carolina's public schools and to ensure equitable pay to female and minority state government employees and serve as model employer.³

11

Source: N.C. Department of Public Instruction, 1991 Statistical Profile.

Table 5. Women and Men Enrolled Full Time In Higher Education in North Carolina - Fall 1991

Type of Institution	Women	Men		
Public Institutions	66,826	59,905		
Community Colleges	7,182	6,682		
Private Institutions	27,420	25,325		
Part-time students in public and private institutions				
combined total: 33,572 women 24,327 men				

Source: UNC System.

Higher Education

The role of secondary education in the North Carolina public school system is critical for the state if we are to produce the high-skill/high-wage jobs that so many of our leaders are emphasizing today. More females than males -- 56 percent and 44 percent respectively -- received bachelor's degrees in 1991-92. Fifty-seven percent of the master's degrees conferred were earned by women. Each year, however, more men (62 percent) than women (38 percent) receive doctorates. The number of women, particularly minorities, holding doctoral degrees is up "dramatically" over the past decade. Women who earn doctorates increasingly are taking jobs outside the world of Academe. Although teaching remains the most popular occupation, the share of women Ph.D.s taking jobs in industry has doubled over the past decade. See Table 6 on page 13.

Education Professionals

Approximately 16,000 faculty members are employed at North Carolina's private and public colleges and universities. Faculty members include professors, associate professors, assistant professors, instructors and other educators with no official rank. Of the total number of faculty members, approximately 34 percent were women, according to 1991 statistics. Women comprised 12.8 percent of the faculty members classified as full professors. Nearly all institutions of higher learning in North Carolina have twice as many men as women in professor and associate professor positions. The number of women in 1991 holding assistant professorships was nearly equal to the number of men.⁶

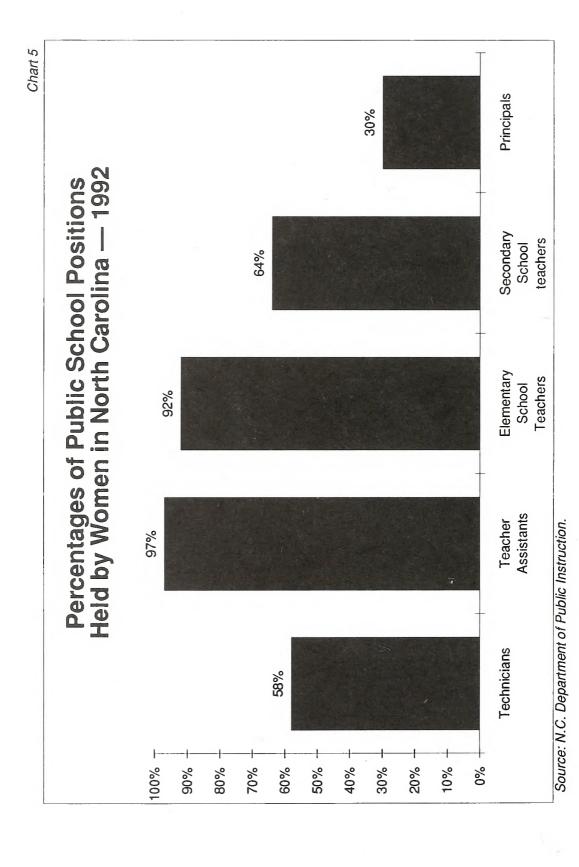
Table 6. Higher Education Degrees Earned by Women in North Carolina in 1992

Degrees	Curriculum	%
Bachelor's	Education	
	Business and Management	49
	Social Sciences	43
	Major Fields Selected by Women	
	Health Professions	83
	Education	74
	Psychology	73
	Physical Sciences	37
_	Computer and Information Services	
	Engineering	
Master's	Education	78
	Health Professions	75
-	Business and Management	40
Doctoral	Education	68
	Health Professions 6	
	Biological Sciences	42
Professional	Law	42
	Medicine	37

Source: Statistical Abstract for Higher Education in North Carolina for 1992-93.

Most women who are granted tenure at the associate professor level, however, do not achieve full professorship. Reasons given for the unequal distribution of tenure for women include: husbands unwilling to follow their wives' academic careers, the fact that women traditionally have children at about the same age as they reach review for tenure, and the fact that women often have to work harder to receive acceptance among faculty and staff. In fact, when women candidates are polite, they are seen as not aggressive enough; when they are assertive, women are seen as "pushy."

Research on salary grades of higher education faculty suggests that even if men and women were promoted at equivalent rates, they would not necessarily be compensated equally. *Working Woman* magazine reported that men can average over \$10,000 a year more than women at the same faculty level.⁷



Elementary and Secondary Schools - In the elementary and secondary public schools, an unbalanced gender ratio also exists. In 1992, 92 percent of the elementary school teachers were women, as were 64 percent of the secondary school teachers. However, women held only 30 percent of all principal positions. There were 623 male teacher assistants as compared to 18,429 women in similar positions. In fact, approximate parity is found only in the category "technicians" (213 men, 293 women). See Chart 5 on the previous page. Non-white teachers represent 20 percent of the total in both elementary and secondary schools.

Dropouts

On the other side of the educational spectrum are the high school students who drop out. During the 1990-91 school year, 43 percent of the dropouts for all grades were female. See Chart 6 "North Carolina High School Dropouts, 1990-91" on page 16. Statistics for 1992-93 echo similar rates. See Table 7 on page 17.

Janice Eagle, in a 1988 report on dropouts, found that a majority of female dropouts are not leaving school because they are pregnant or getting married, as is commonly assumed. Nationally, only 40 percent of the girls who drop out of school fall into that category. In North Carolina, pregnancy accounts for only 3.5 percent of the reasons reported, and marriage accounts for only 1.7 percent. The most common reasons for dropping out in North Carolina are lack of attendance and choice of employment over education. Eagle's research revealed low socioeconomic status, minority status and low parental education levels are typical characteristics that correlate with both male and female dropouts. She concluded a large number of women pattern themselves after mothers with low levels of educational attainment as well as rigid gender stereotyping which motivates girls to excel in "personal skills that do not include academic or career planning."

Source: N.C. Department of Public Instruction, 1991 Statistical Profile.

Table 7. North Carolina High School Dropouts, Male and Female Grades 1 - 12 - 1992-93

Demographic Data	% of
	Dropouts
Sex	
Female	41.78
Male	58.22
Race	
Native American	1.82
African American	35.91
Caucasian	60.17
Hispanic	1.33
Asian/Pacific Islander	0.77
Curriculum ¹	
General curriculum	69.06
Exceptional children ²	12.94
Vocational education	7.96
Technical preparatory	5.28
College preparatory	4.76
Community college	4.31

Source: North Carolina Department of Public Instruction, Dropout Data, 1992-93.

By racial group, Hispanic females have the highest dropout rate, followed by Native American, African-American, Caucasian and Asian-American females. Girls are most at risk of quitting school in the summer between 9th and 10th grades and during 12th grade. 12

¹ 89.69 percent of all dropouts were from the general curriculum; 10.31 percent were from alternative programs.

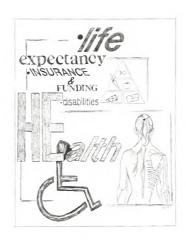
² Of the exceptional children who dropped out, 3.58 percent were academically gifted.

Vocational and Technical Education

For girls who do not go to college, vocational and technical training in high school is an important option. Without skills or training, it is nearly impossible for women to become economically independent. Women often choose fields that are dominated by women. These vocations have comparatively lower pay grades. For example, 64 percent of the students in business and office training are girls, as are 86 percent in education, and 76 percent in home economics. In contrast, non-traditional areas of study draw a much smaller percentage of girls, although wages for such jobs are comparatively higher than traditional "women's" jobs. Girls make up only 9 percent of students studying technology education and 13 percent in trade and industrial education. Choosing a non-traditional area of study is essential if women are to move from lower paying, gender-segregated employment. Gender-stereotyping is so prevalent in our society that young men and women quickly learn the social code that defines what is "women's work" and what is "men's work." It has become the responsibility of educators to encourage broad career exploration and teach students that the job market is not segregated by an unspoken law. Women's organizations and equal opportunity advocates across the state endorse encouraging women to train for traditionally male occupations and receive support to enter male-dominated vocational training programs. 13

Endnotes

- 1. U.S. Department of Commerce, Bureau of the Census, 1990 Census of the Population of the United States.
- 2. N.C. Equity, Women's Legislative Agenda Project, 1992-93.
- 3. N.C. Equity Draft Women's Agenda 1995-1996.
- 4. *USA TODAY*, September 4, 1990, "More Women Are Receiving Doctorates," page 4D.
- 5. Ibid.
- 6. University of North Carolina System, Table 52, UNC Statistical Abstract of Higher Education, 1991.
- 7. Russell, Anne. "Twelfth Annual Working Woman Survey." *Working Woman*. January 1991, page 68.
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Women's Health

Women today must balance the demands of children, partners, household responsibilities and, very often, the pressures of paid employment. Many women neglect their own health needs for those of others for financial reasons, time constraints, or both. When a woman's health collapses, often the health of her family collapses as a consequence. Without her health, her options are limited, her family and career suffer, and her future is uncertain. Dr. Bernadine Healy, the first woman ever to head the National Institutes of Health (NIH), established the Women's Health Initiative, a \$625 million research effort to study the causes, prevention and cures of diseases that affect women. The project is the most ambitious clinical study in history and will involve more than 160,000 women nationwide, studying the impact of diet, hormone-replacement therapy and other variables in an attempt to learn more about heart disease, cancer and osteoporosis -- the major causes of death and disability in women. ¹

Currently, state and national task forces are trying to design a health care program that provides adequate coverage for all Americans. There have been new approaches to prevention and primary care to help all Americans, particularly women and children.

Leading Causes of Death

Heart Disease - Nationally and in North Carolina, heart disease is the leading cause of death for women. Stroke is the third leading cause of death, behind cancer. Although the fatality rates for cardiovascular diseases (including stroke and heart disease) are declining, they continue to pose a major threat to the health of women. Women have higher levels of false-positive results of stress tests, which are a major screening

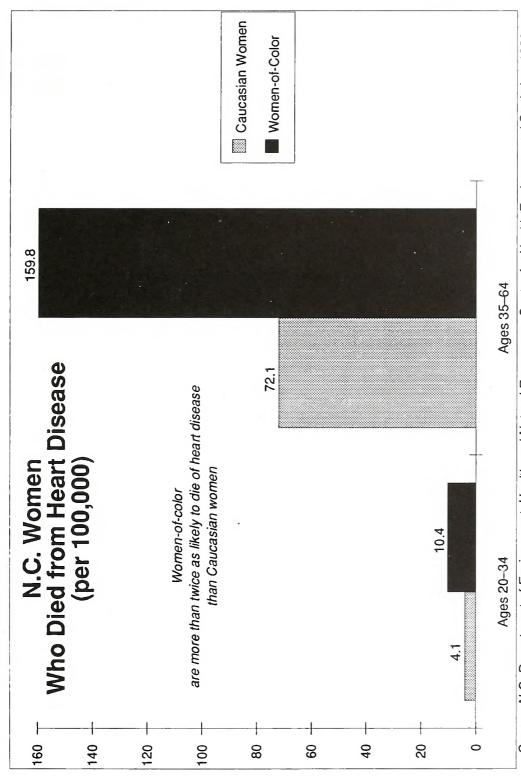
technology for coronary disease. When women have heart attacks, they are more likely to rupture their hearts. Women have higher death rates from heart attacks, heart surgery and angioplasty.² By age 40 coronary heart disease is the leading killer of men, but women seem protected until they are in their 60s, probably by their hormonal levels. Women face a greater danger of mortality than men from an initial heart attack, and a slower and less complete recovery than men in the first year after the heart attack. Half of all women who have heart attacks die within one year, compared to only 31 percent of men.³

Women-of-color are over twice as likely to die from heart disease than Caucasian women between the ages of 20 and 34 (10.4 vs. 4.1 per 100,000 deaths) and between the ages of 35 and 64 (72.1 vs. 159.8). See Chart 7 on the following page.

Studies have shown that women delay seeking care for heart disease, often because they believe they are not likely to develop it.⁴ Further studies indicate that physicians judge women's heart-disease symptoms less seriously than men's symptoms, that women wait longer than men for an initial electrocardiogram, and that women are less often admitted to the intensive care unit for a heart condition than men.⁵

The leading causes for smoking-attributable death are heart disease and lung cancer.⁶ In addition, several risk factors for cardiovascular diseases are unique to women: oral contraceptives, early menopause due to removal of the ovaries, and the hormonal changes of menopause.

Cancer - The second leading cause of death among women in North Carolina and nationwide is cancer. Lung cancer is the No. 1 cancer killer, and breast cancer is second. Lung cancer surpassed breast cancer in 1980 as the No. 1 cancer killer. The rise in the incidence of lung cancer is attributed to the large numbers of women who smoke. Approximately 25 million American women smoke; women under the age of 23 years are the fastest growing group of smokers. Proportionately, more girls than boys smoke cigarettes in high school. In 1965, 34 percent of American women smoked; in 1987, 28 percent of women smoked. Women are smoking less, but more men have stopped. The North Carolina Behavioral Risk Factor Surveillance System (BRFSS) estimated prevalence of current smokers among persons 18+ years in 1990 to be 24.1 percent of white females and 19.0 percent of non-white females.



Source: N.C. Department of Environment, Health and Natural Resources, Center for Health/Environmental Statistics, 1990.

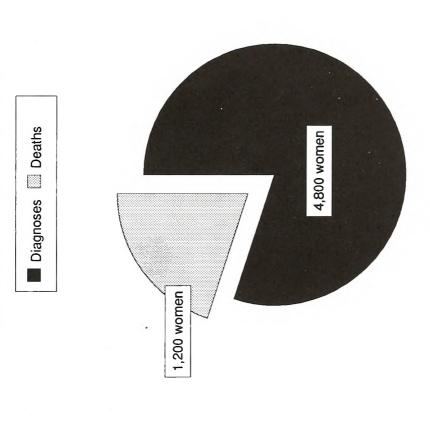
Breast cancer is the most common cancer in women. One in eight women is expected to develop breast cancer in her lifetime. While detection and treatment have improved, the incidence of cancer is rising faster than in previous years. Breast cancer will be diagnosed in approximately 2 million American women in the 1990s and approximately 460,000 will die. In 1994 an estimated 4,800 North Carolina women will be diagnosed and 1,200 will die from breast cancer. See Chart 8 on the following page.

Policy-makers recognize that women should have access to mammograms. In 1990, Congress added mammography benefits to Medicare coverage for women over 65. However, the extended benefits are not widely utilized and are of limited value, as women over age 65 are the primary beneficiaries. North Carolina passed a mammogram/Pap smear bill in 1991 requiring companies with 50 or more employees who offer health insurance to include mammogram and Pap smear coverage unless the company is self-insured.

Seventy percent to 80 percent of all breast cancer patients have no family history of breast cancer. ¹² For these women, other factors, such as early menstruation, late menopause, obesity and excess fat consumption, may contribute to the risk. Researchers are looking more closely at environmental influences on breast cancer. ¹³

A woman with a number of close relatives who have had breast or ovarian cancer, especially if both diseases occur in successive generations among women under 45, is considered to be in the very high risk group. 14 Preventive measures for women with such a history of cancer include frequent screening with mammography, treatment with the drug Tamoxifen, or prophylactic mastectomy. 15 If a woman has a family history of ovarian cancer, her physician should discuss screening with the blood test CA-125 and imaging techniques such as transvaginal ultrasound which can detect cancer. 16 The cure rate can be as high as 90 percent if diagnosed early. 17





Source: American Cancer Society, North Carolina Chapter.

Osteoporosis - Ninety percent of women over age 75 suffer from osteoporosis. 18
Osteoporosis causes bones to be more susceptible to breakage due to progressive bonemass loss. It is a disease that is attracting more attention because it is now considered a leading cause of death in the elderly due to hip fractures. It is estimated that between 12 percent and 20 percent of all hip fracture patients die within six months. Hip fractures and their complications result in more deaths, disabilities and medical costs than all other fractures from osteoporosis. It destroys years of life and often is the reason women end up in nursing homes. 19

It is projected that approximately 700,000 women in North Carolina currently have osteoporosis. Factors that seem to accelerate loss of bone mass include: lack of exercise, menopause, cigarette smoking, inadequate dietary calcium, excessive alcohol consumption, and prolonged use of over-the-counter antacids that contain aluminum (such as Di-Gel, Maalox and Mylanta).²⁰ Practicing good health habits throughout life can help prevent osteoporosis after menopause. The most important steps are regular weight-bearing exercise, such as walking or running and adequate calcium and vitamin D intake.²¹

Dr. Sydney Lou Bonnick, director of osteoporosis services at the Cooper Clinic in Dallas, suggests that as women approach menopause they have their bone mass measured using bone densitometry.²² Bone densitometry allows a doctor to assess a woman's risk for fracture and predict the probability of her developing brittle bones in 10 or 20 years.²³ Starting estrogen replacement therapy (ERT) after menopause has been recommended for some time as the most effective means of reducing bone fractures in older women. New evidence indicates, however, that estrogen must be continued for many years -- perhaps indefinitely -- to extend the benefit into a woman's 70s and 80s, when fracture risk is greatest.²⁴ Despite the positive effect of estrogen on bone (as well as its beneficial effects on the cardiovascular system and on menopausal symptoms), about 75 percent of women decide against ERT for a variety of reasons, including a family history of breast or endometrial cancer, uncontrolled hypertension, severe edema (fluid retention), recent thrombophlebitis (inflammation of a vein associated with the formation of blood clots) or fibroid tumors.²⁵

For women who cannot take estrogen or choose not to, two other post-diagnosis treatment options can be considered, Bisphosphonates or Calcitonin.²⁶

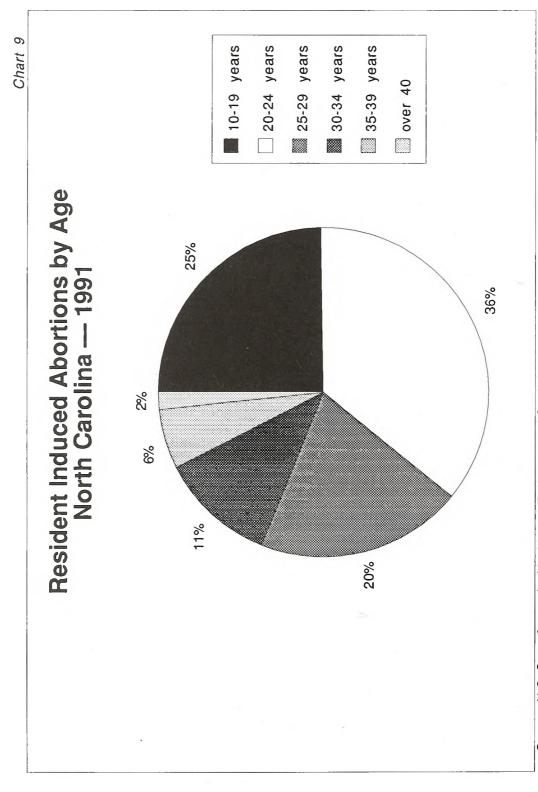
Alzheimer's Disease - Alzheimer's disease is a progressive disorder that gradually destroys memory, the ability to function, and, eventually, life itself. There is no cure and the disease is always fatal. An estimated 2.5 million to 4 million Americans have the disease.²⁷ An estimated 89,850 people in North Carolina have Alzheimer's with over half of these victims being female.²⁸ Currently, Alzheimer's disease can be diagnosed with certainty only with an autopsy.²⁹ Many studies and research are being done on Alzheimer's disease, with Duke University Medical School in North Carolina being one of the leaders.

Maternal Mortality - The likelihood of dying in childbirth or from related infection was 50 percent 100 years ago. Infection caused many pregnancy-related deaths, as did abortions performed in unsanitary conditions. In North Carolina and throughout the nation, the single most dramatic change in women's lives has been the decrease in maternal mortality. Legalizing abortion, which granted the opportunity for intervention at a very early stage of pregnancy if there were complicating factors, and developing antibiotics are the critical agents of this profound change. North Carolina's maternal mortality rate from 1987 to 1991 was 10.6 per 100,000. In 1991, five women died from complications of pregnancy and childbirth.

Deaths because of complications during abortion have fallen to one death per 100,000. Only two deaths from abortion complications were reported from 1980 through 1991.³⁰ See Chart 9 on the following page.

A public policy change in 1973 provided funds under Title XIX and Title XX programs for elective abortion in the health support services for Medicaid patients and recipients of Aid for Families with Dependent Children in North Carolina.

Forty-four million women depend on the federal government for health coverage.³¹ In 1993, however, 83 percent of all United States counties no longer contained clinics or hospitals providing abortion.



Source: N.C. State Center for Health and Environmental Statistics.

Morbidity (the amount of time a mother stays in the hospital as a result of pregnancy or birth complications) remains a poverty/access-to-maternal-care issue. The following table gives the inpatient percentage of hospital stays related to complicated pregnancies in fiscal year October 1991 to September 1992.

Table 8. N.C. Morbidity Rate Resulting From Complications - 1991-92

Type of Delivery	Percentage with		
	Complications		
C-Section	24.0%		
Vaginal	10.7%		
Total Deliveries	13.9%		

Source: N.C. Department of Insurance.

Women with a pregnancy-related hospital stay pay nearly \$1,100 out-of-pocket expenses nationally.³² Poverty, which increases a woman's likelihood of having complications in pregnancy, also prevents her from paying her own increased expenses.

Maternal, infant and fetal mortality rates and low-birth-weight babies correlate with poor or non-existent prenatal care. Medicaid coverage expansion -- in 1987 to include pregnant women in families with incomes below 100 percent of the poverty level and in 1990 to cover all pregnant teens as well as to allow the income level to be 185 percent of the poverty level -- reduces the barriers to prenatal care.

Table 9. Percentage of N.C. Mothers Receiving No Prenatal Care

	Ages 10-17		Ages 18+	
	1990	1993	1990	1993
Caucasian	3.2	1.5	0.9	0.6
Non-Caucasian	4.2	2.7	3.3	2.6
Total	3.7	2.2	1.6	1.2

Source: State Center for Health and Environmental Statistics, N.C. Department of Environment, Health and Natural Resources, 1994.

Local health departments deliver much of the prenatal care to poor and indigent women. Health directors from 87 health departments responded to a survey asking what

barriers exist in providing maternal health services. The response most frequently cited involves transportation problems.

Table 10. Health Service Barriers in North Carolina

Types of Barriers	Number of Counties Responding		
Transportation to clinics for patients	62		
Need for more physicians	39		
Clients attending care late	28		
Need for improved clinic availability	20		
Payment and payment program	19		

Source: Statewide Needs Assessment, 1991.

The waiting period for a prenatal care visit is at least three weeks, and as many as 85 counties report that the staff is inadequate to meet current needs. Eighty counties need additional physical space. And the most serious access issue is that 27 percent of the 766 physicians performing deliveries do not accept Medicaid assignments.

In 1988, out of 50 states, North Carolina ranked 49th with an infant mortality rate of 12.5 per 1,000 live births. By 1992, 1,031 infant deaths and 103,925 live births were recorded, for an infant mortality rate of 9.9 per 1,000 live births.

Table 11. N.C. Infant Deaths by Race - 1990

Race	% of Deaths
Caucasian	7.2
Women-of-Color	15.7

Source: N.C. Department of Environment, Health and Natural Resources.

The Center for Disease Control reports that nationally Caucasian infant deaths fell 33 percent from 10.9 to 7.3 per 1,000 births from 1980 to 1991. African-American infant mortality dropped in the same period nearly 21 percent, from 22.2 to 17.6 per 1,000 births. The director of the Minority Health Research Laboratory at Emory University lays

much of the blame for the insignificant drop in African-American infant mortality to cuts in federal programs that provide for prenatal visits.

North Carolina has had success with BABYLOVE, its outreach program that targets low-income pregnant women.

An in-depth discussion of maternal health issues can be found in the *Statewide Needs Assessment*, Region IV Network for Data Management and Utilization, N.C. Department of Environment, Health and Natural Resources.

HIV Infection - Sexually transmitted diseases (STDs) have been on the rise with North Carolina being ranked the highest of all states in STDs.³³ Human immunodeficiency virus (HIV) is the deadly viral infection that causes AIDS. HIV infection is diagnosed as AIDS when the immune system is unable to fight off serious infections leading to rare types of pneumonia, cancer, meningitis and other viral infections. Some of the viral infections it can cause in women are cervical cancer and severe viral and fungal (yeast) infections of the genital tract.

By 1991, more than 20,000 adult and adolescent females in the United States had been diagnosed with AIDS.³⁴ The incidence of infection, though still small in actual numbers, is rising rapidly, with 12 AIDS cases reported before 1980 in North Carolina, and, as of June 30, 1994, there have been a total of 4,849 documented cases. There have been 2,836 deaths.³⁵

Women are more likely than men to become infected with AIDS from heterosexual intercourse. The years of highest sexual activity (between ages 18 and 41) produce the most risk with the highest incidence of AIDS occurring between 24 and 35 years of age.

Table 12. N.C. Females Testing HIV Positive February 1, 1990 - May 31, 1993

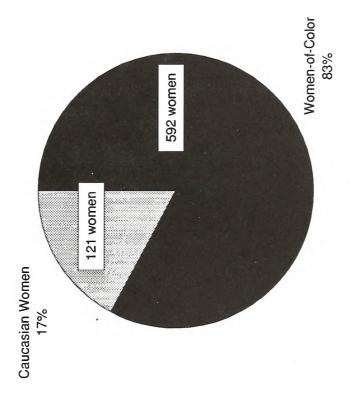
Race	Number
Caucasian	213
African American	1,054
Native American	11
Unknown	4
Hispanic	1
Asian	1

Source: HIV/STD Control Branch, June 1, 1993.

Since 1984 when the state began tracking the disease, 713 women have been diagnosed with AIDS. See Chart 10 on the following page. African-American women represent 83 percent of those cases.³⁶ The rates nationally rose from 1990 to 1991 by 37 percent for women, as opposed to a 4 percent increase for men. Research on AIDS precursors is conducted on men which means that women who are infected do not receive the early diagnosis and intervention needed for long-term survival.

N.C. Women Diagnosed with AIDS

1984 - 1993



Source: N.C. Department of Environment, Health and Natural Resources, HIV/STD Control Branch, 1993.

Life Expectancy for Women

Life expectancy correlates with the development of public health measures such as sanitation, environment quality, potable water, adequate diet and access to primary health care.

Life expectancy rates for women in North Carolina are increasing. In 1980 life expectancy was 78.5 years for Caucasian women and 73.4 years for women-of-color. By 1990 it had increased to 79.7 years for Caucasian women and 74.7 years for women-of-color. Projections to the year 2010 predict life expectancies of 82 years for Caucasian women and 79 years for women-of-color, according to the N.C. Division of Aging.

Women-of-color are more likely to die from any of the top 10 causes of death in women before age 65 except suicide and chronic pulmonary disease. In some cases, the difference in rates is startling. The following 1990 figures show the causes of death per 100,000 North Carolina women ages 35 to 64:

Table 13. Ten Most Likely Causes of Death per 100,000 N.C. Women Ages 35-64 - 1990

-	Caucasian Women	Women-of Color	
Heart Disease	72.1	159.8	
Cancer	154.7	180.0	
Stroke	roke 16.9		
Accidents	16.7	26.9	
Chronic Obstructive Pulmonary Disease	15.2	7.4	
Pneumonia/Influenza	5.2	10.9	
Diabetes	8.6	34.3	
Suicide	9.4	2.3	
Homicide	2.6	10.1	
Chronic Liver Disease/Cirrhosis	6.7	19.5	

Source: Information Services Division of N.C. Department of Environment, Health and Natural Resources.

Access to appropriate health care is a primary strategy for reducing the premature death rates from disease. Almost one-third of all North Carolinians are without health insurance coverage at some time during any given year, and for many, the coverage is not enough to meet basic health care needs. A study by Chris Conover of Duke University finds that women are less likely than men to have employer-based health insurance. In fact, 375,700 women of child-bearing age in North Carolina do not have any health insurance; this represents 23 percent of the women age 15 to 44 in the state.³⁷

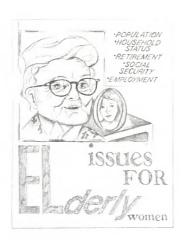
Medicaid, the need-based insurance for the extremely poor, was used by 568,843 women in North Carolina during 1992. In order to qualify, an older single woman in 1990 could have no more than \$242 in monthly income.

Women statistically live longer, but they experience more chronic health problems. If health care were more readily available, their quality of life would improve.

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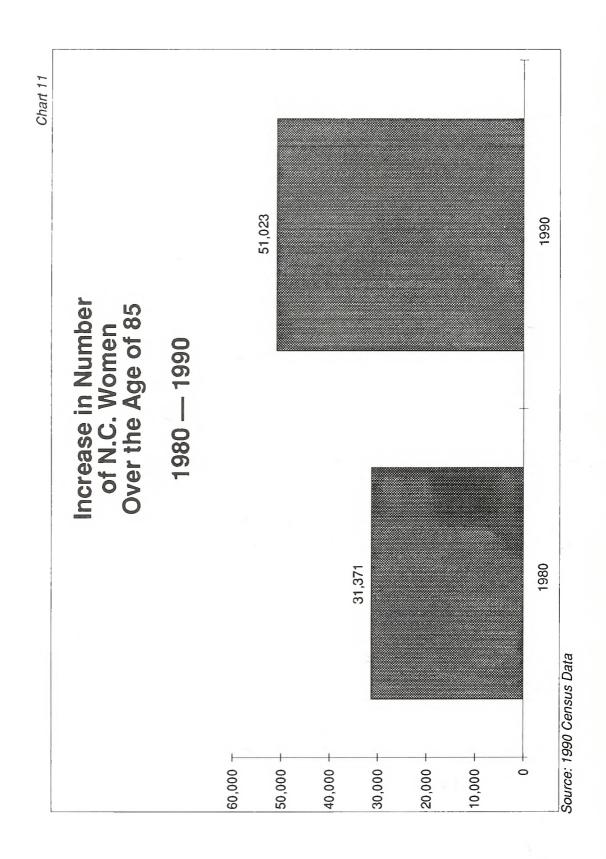
Older Women

Today there are over 1.3 million North Carolinians over age 55, and 805,323 are women. In the first half of the 1980s North Carolina was one of 11 states which experienced a 20 percent or more increase in people over age 65. By 2010, the older population of North Carolina is expected to double to nearly 1,118,000, the result of increased longevity and in-migration.¹

North Carolina has always had more older women than men. In fact, the disparity begins at ages 30 to 34. According to the 1990 census, 62 percent of the population over 55 is female. The fastest growing group (women over 85) has increased from 31,371 in 1980 to 51,023 in 1990. See Chart 11 on the following page. Nationally, for every five women over age 85, there are two 85+ men.

Women live, on the average, more than seven years longer than men. In North Carolina, the life expectancy of Caucasian women is 79.7 years; for minority women, 74.7 years. Minority women who reach age 85, however, can expect to live slightly longer than Caucasian women age 85.2

National life expectancy rates for African-American men decreased from 65.2 years in 1980 to 64.9 years in 1990, while the rate for African-American women dropped slightly, from 73.6 to 73.4 years. Economic status, access to health care, educational attainment, and homicide for African-American men contribute to the lower life expectancy.



Eight out of 10 North Carolinians over age 55 are Caucasian. Among non-whites, 93 percent are African American, 3.8 percent are Native American and 2.8 percent are Asian American. While the older non-white population has grown dramatically during this century, the proportion has decreased from almost 30 percent in 1900 to 20 percent in the past 30 years. This may be attributed, in part, to an immigration of younger Caucasians and an emigration of younger African Americans from North Carolina.³

Marital/Household Status

Widowed Caucasian women over age 75 in North Carolina tend to live alone. African-American widows are greater in number than white and tend to live with other family members. Older men are more likely to be married. To illustrate, between ages 65 and 74, approximately 81 percent of the men live with a spouse while only 49 percent of the women in this age category live with their husbands.⁴ National figures indicate that 11.1 million women over age 65 live in poverty or with inadequate housing. More than half of North Carolina's older women live at or below the poverty level. Their median income is \$6,884. This low level of income reflects the effects of widowhood, low Social Security payments, the result of low wages all their lives, little or no pension income and a lack of employment opportunities. Older minority women bear the lowest median income of all older people.⁵

As married people age, one typically becomes the primary caregiver. Major adjustments must be made when the primary caregiver precedes the other in death. Changes in housing, income level, social patterns and nursing care become major considerations.

The National Health Interview Survey reports that over half the 20 million Americans with activity impairments are women. Ten percent of the women age 75 to 84 and one-fourth of those 85 and older are limited in at least one activity of daily living. Lack of transportation and loss of automobile driving capability severely limit mobility needed, for instance, in shopping for food or seeing a physician. The leading causes of disability among this group are arthritis, osteoporosis, hypertension, and visual and hearing impairments.

Most older women live in a non-institutionalized environment because only 4.1 percent have limitations on self-care. An additional 5 percent have mobility limitations and must seek outside care. In most cases, the caregiver is a female relative.⁶

Table 14. Mobility and Self-Care Limitations of N.C. Elderly - 1990

	Female		Male	
Age	65-74	75+	65-74	75+
Total Population	272,855	186,702	205,156	106,580
With limitation				
Mobility	18,675	33,902	9,951	10,466
Self-Care	12,362	7,934	9,749	5,039
Both	15,116	31,238	10,341	12,255
With no limitation	226,702	113,638	175,116	68,501

Source: U. S. Department of Commerce, Bureau of the Census.

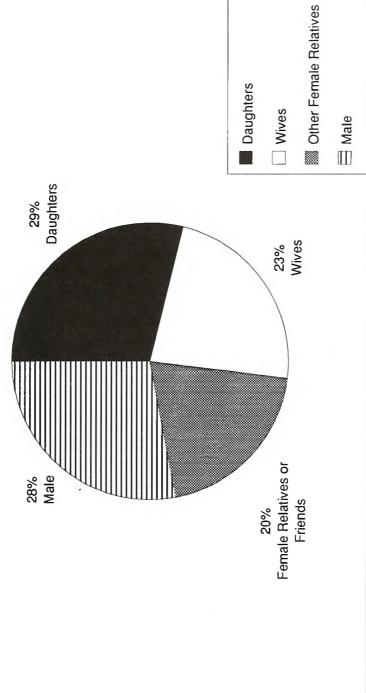
The 1987 Older Women's League report reveals that 72 percent of the caregivers are women with an average age of 57. See Chart 12 on the following page.

Thirty-one percent of the caregivers are also in the paid work force, but some are forced to leave their paid employment to give full-time care. Many other women reduce their work schedules to care without pay for the disabled. This ultimately reduces their own retirement resources.⁷

An average of 9.3 hours per month is lost from "work time" to "caregiving" by employed persons. In addition to caring for the elderly, approximately 39 percent of the caregivers still have children in the home.

Caregivers in the United States

72% of All Caregivers Are Women



Social Security

There were 477,745 North Carolina women age 65 and older who received Social Security benefits in 1991. The average monthly benefit as of December 1991 was \$497, compared to \$530 nationally. Social Security was designed to provide supplemental income for retired persons at a time when life expectancy in the United States was 66 years. The Older Women's League reports that in the United States, 60 percent of the women over 65 years old who live alone rely on Social Security as their sole income, and 80 percent have no access to pension benefits.⁸

Nationally, 92.6 percent of the women over 65 years depend on Social Security as a source of income. Supplemental Security Income (SSI) serves as a source of financial support for 7 percent of all the nation's women. When examined by race, approximately 25 percent of women-of-color rely on SSI alone. The maximum monthly SSI benefit in North Carolina was \$434 in 1993. The maximum monthly SSI benefit in North Carolina was \$434 in 1993.

Almost 17 percent of all Medicaid recipients are elderly. Skilled-level nursing home facilities demand the largest expenditure of all Medicaid dollars, 43.2 percent. Only 0.3 percent is spent on dental care. In 1992, the average expenditure per recipient age 65 and over was \$5,122 per year. Despite the access to health care that Medicare and Medicaid provide, these programs are not panaceas. Medicare covers only about 45 percent of the health care expenses and does not include dental and optical care, prescription drugs and long-term nursing care. Nursing home care in 1993 ranged from \$25,000 to \$50,000 per year, depending on level of care.

The qualifying level of income for Medicaid is very low. People living just above the eligibility levels are forced to spend all discretionary income in order to qualify for coverage. American Association of Retired Persons (AARP) statistics state that 51 percent of the long-term care is paid by private sources, 49 percent comes from the government, and less than 1 percent comes from private insurance. 14

Older Workers

Despite the incentives toward early retirement and highly publicized examples of the "golden parachute" for older citizens, North Carolina is home to 102,217 senior citizens who are still in the work force, 44,027 of whom are women. Since 1980 the work force rates among older women have dropped slightly from 10.8 percent to 8.1 percent. The North Carolina Aging Services Plan reports that the North Carolina work force participation rates are consistent with national ones, which suggests that while the work force will continue to grow older, the early retirement trend will also continue. Men are retiring earlier, because their access to pensions is higher, and the aforementioned "golden parachutes" are offered as incentives.

Women in the labor force continue to work well into retirement age if they are able. North Carolina participates in the Senior Community Service Employment Program (SCSEP) and the Older Workers Program of the Job Training Partnership Act (JTPA). JTPA provides training for and access to employment and community service opportunities, and SCSEP is administered through private employers.

Elder Abuse

It is speculated that most cases of elder abuse go unreported; therefore, it is difficult to determine its true scope. A report, "Elder Abuse: A National Disgrace," prepared in 1985 for the U.S. House Select Committee on Aging, reveals that about one out of 25 older Americans suffers abuse.

Since 1986, the number of reported disabled adult abuse cases in North Carolina has risen. In fiscal year 1986-87, there were 4,625 reported cases, compared to 6,525 in fiscal year 1991-92. The number of reported cases is higher for women than for men. In fiscal year 1991-92, there were 4,070 female cases, compared to 2,429 male cases. Of the 6,565 reported cases of disabled adult abuse, 2,100 were classified as elderly.¹⁶

North Carolina enacted adult protective services statutes in July 1985. The statutes state that any person having a reasonable cause to believe that an adult is in need of protective services shall report it. This section of the law also grants criminal

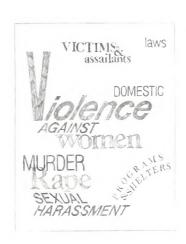
immunity to the reporters of the abuse, witnesses testifying in abuse cases or any other person participating in a required case evaluation, unless such person has acted in bad faith or with malicious intent.¹⁷

The law also requires social services directors to make prompt evaluations of any reported cases and, deeming necessary, place the adult in protective services. Upon finding evidence of abuse, the director is to notify the district attorney.

U.S. Attorney General Janet Reno says that more than 1 million older women are victims of abuse each year.

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Violence Against Women

Violence pervades our society more intensely every day. Brutal crime is on the rise and is becoming more commonplace. Many of these crimes are not random acts of violence but unprovoked attacks motivated by race or gender. Women make up a large part of the victims of this kind of crime. "Violence Against Women" refers to violence in which women are the primary victims. This section discusses the violence and threatening situations women encounter in our society. This section includes information on domestic violence, sexual assault and rape, murder and sexual harassment.

Nationally, the rate of violent crime against women remained constant over the last 20 years while the rate of violent crime against men dropped sharply. National statistics indicate one out of every three women will be raped by a man in her lifetime. In the United States, statistics indicate two-thirds of the female victims reported knowing their attacker. Approximately 28 percent of the offenders are husbands, boyfriends, or former husbands or boyfriends. Some 30 percent of female homicide victims are killed by their husbands or boyfriends. Further, attacks on women are twice as likely to result in serious injuries requiring medical attention when the attacker is an intimate acquaintance. In contrast, violent crimes against men are committed by acquaintances in only half the attacks, and only 5 percent are committed by intimates or relatives.²

Trends in violent crimes in North Carolina correlate with the national statistics. Information from the 1992 North Carolina Crime Report indicates that 64.8 percent of female rape victims know their attacker. A staggering 51.2 percent of the offenders are reported to be an acquaintance of the victim but not a relative. See Table 15 on the following page.

Table 15. Rapes and Relationship of Victim To Offender in North Carolina - 1992¹

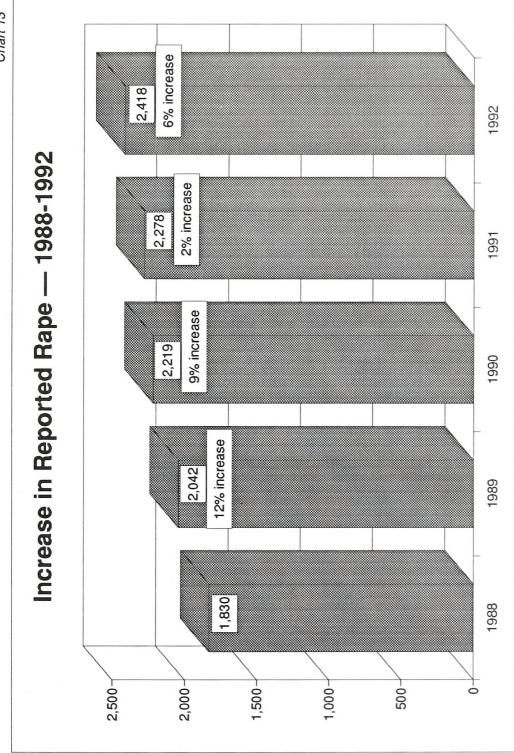
Category	1991	Percent Distribution ²	1992	Percent Distribution ²
Acquaintance	1,158	50.6	1,237	51.2
Girlfriend	74	3.2	88	3.6
Wife	16	0.7	28	1.2
Ex-Wife	26	1.1	13	0.5
Neighbor	19	0.8	9	0.4
Mother/Stepmother	0	0.0	4	0.2
Daughter/Stepdaughter	82	3.5	78	3.2
Sister	12	0.5	10	0.4
In-Law	14	0.6	5	0.2
Other Family	19	3.4	97	4.0
Total Known to Victim	1,480	64.7	1,569	64.8
Stranger	784	34.3	788	32.6
Relation Unknown	24	1.0	61	2.5

Source: N.C. State Bureau of Investigation, 1992 Uniform Crime Report.

Frequent media reports of rape, domestic violence and sexual harassment could indicate an increase in incidents. Some researchers suggest that only the *reports* of incidents and not the actual number of incidents are increasing due to an increasingly responsive legal system. However, law enforcement agencies and women's organizations agree that, for example, only 7 percent to 10 percent of all rapes are reported to police. The same sources agree that the ratio of actual rapes to reported rapes has, in fact, remained constant since 1970. This would indicate the rise in the number of reported incidents is an accurate reflection of the increase in crime incidents.³ Chart 13 on the following page depicts the increase in reported rapes in North Carolina each year from 1988 to 1992, and Chart 14 on page 52 shows reported rapes in 1992 by ages of victims. The rapes reported to the North Carolina Bureau of Investigation in 1992 indicated that women between 16 and 20 years of age are either more vulnerable or more prepared to report this violation. See Table 16 on page 58.

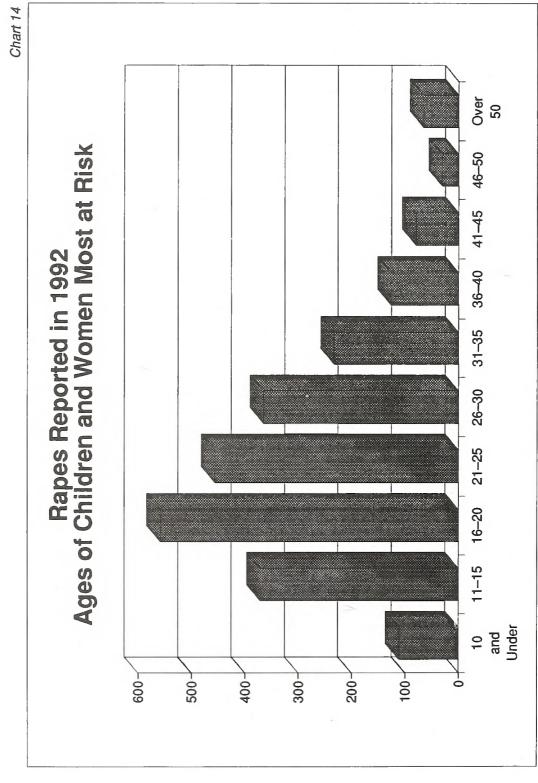
¹ Includes both actual and attempted rapes.

² Percentages may not equal to 100 percent due to rounding.



Source: N.C. State Bureau of Investigation, Uniform Crime Report, 1992.

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Source: N.C. State Bureau of Investigation, Uniform Crime Report, 1992.

Women's and civil rights organizations have demanded equal protection under the law. As public awareness of crimes against women increases, legislators are recognizing and addressing the inequities of the law to provide equal protection for both women and men. These changes in law are highlighted at the end of this section.

Domestic Violence

The leading cause of injury to women between the ages of 15 and 44 years is violence committed by an intimate or estranged partner. These injuries cost business an estimated \$3 billion to \$5 billion annually in lost work days, lost productivity and medical bills.

The first domestic violence (DV) shelter for women in North Carolina opened in Caldwell County in 1978. Similar programs followed in other, more populated areas of the state. During the 1980s, funding for DV programs came from a variety of public and private sources. Reliable and consistent funding is an ongoing problem for programs. The North Carolina General Assembly first appropriated state funds for domestic violence centers in 1982 and designated the North Carolina Council for Women as the administering agency. In that first year, 17 programs received grants of approximately \$10,000 each. In fiscal year 1993-94, the 64 domestic violence programs received \$18,706 each; in fiscal year 1994-95, 65 programs will receive \$18,038. In 1991, the General Assembly voted to double the fee required to purchase a marriage license in North Carolina and divide the extra \$20 revenue equally among the domestic violence programs funded by the Council for Women. Marriage license fees in fiscal year 1991-92 generated an additional \$11,874 for each eligible program. In fiscal year 1993-94, the marriage license fees totaled \$15,108 per program, and it is estimated that in 1994-95 the fees will total the same amount per program.

State funding, although it has increased in the last decade, is insufficient to fully support the effective operation of DV programs. Programs must apply to a variety of agencies and foundations to receive enough funding to continue providing quality services. In some cases, programs have shifted their emphasis away from basic services for battered women to new and untested directions to qualify for funds from sources with different priorities.

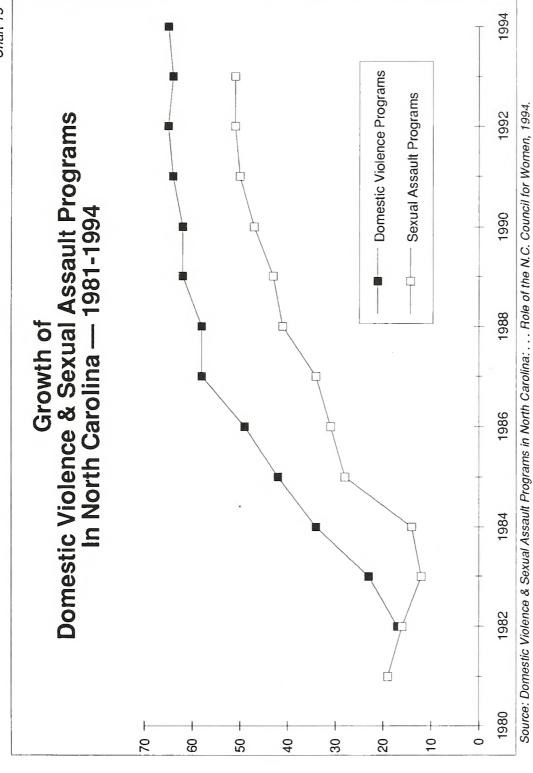
Because DV programs in the state have organized through local grassroots efforts, statistics have not been recorded consistently among all DV programs over the years. Even with the implementation of the N.C. Department of Administration reporting requirements, statistics are inconsistent due to varying interpretations of reporting categories. The North Carolina Council for Women continues to work toward refining categories in order to obtain the highest degree of statistical accuracy. For an overview of the growth of state appropriations for domestic violence programs and the growth in the number of programs serving women in North Carolina, see Chart 15 on page 55 and Chart 16 on page 56.

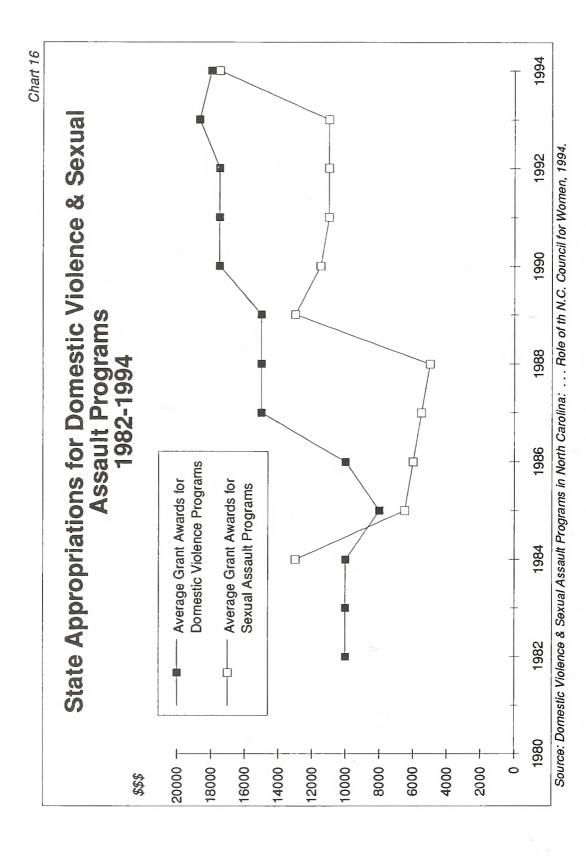
Statistical information currently available on DV in North Carolina is compiled from the 65 reporting programs receiving funds through the North Carolina Council for Women. Reports are submitted on primary victims, against whom the violence is directed, and secondary victims, any family members who receive assistance from a program as a result of the crime inflicted on the primary victim. In fiscal year 1992-93, local programs served 20,006 primary victims and 13,682 secondary victims of domestic violence.⁴ Obviously, these numbers do not include those women who seek support from family, friends, clergy, physicians, the judicial system, private therapists, employee assistance, mental health programs, substance abuse programs or other support services.

In order to receive funding from the state, program services are mandated to include a 24-hour crisis hot line, crisis intervention, individual and group counseling services, emergency transportation, community education, children's services, safe shelters, food and advocacy for victims. Because every county does not have a separate program, some programs serve two or more counties. Fifty-five of the 65 programs funded in fiscal year 1992-93 provided shelters for women and children. These numbers do not represent an accurate account of the victims, as at least 50 percent of the women in homeless facilities are also victims of battery.⁵

Domestic violence occurs in all races, ethnic groups, religions, educational attainment levels, and socioeconomic classes. Research on domestic violence shows that there is no particular background that indicates a greater risk of victimization. In fact, the single most common characteristic among victims of domestic violence is that they are female. Only 1.4 percent of the victims were male in 1991-92 reports. Fifty-five percent of those served were Caucasian, 20 percent were African American, and the remaining 22 percent of victims were not identified as being of a particular race.⁶







Rape and Sexual Assault

The State Bureau of Investigation (SBI) publishes the number of forcible rapes reported each year in North Carolina. Forcible rape is defined as "carnal knowledge of a female through use of force or the threat of force." Attempts to commit forcible rape are also included in this category. Rapes included in the SBI report are limited to those reported to law enforcement officials. It is estimated, however, that less than 10 percent of all rapes are reported to authorities.

Between 1988 and 1992, reported rapes have increased by 76 percent. In 1988, 1,830 rapes were reported as compared to 2,418 in 1992. The 1992 statistics averaged 201 rapes per month, or 6.5 rapes per day. The 1992 figures averaged 5.7 percent higher than those in 1991.9

Currently, there are two degrees of rape with which an individual can be charged in North Carolina. First-degree rape carries a mandatory life sentence and requires that the prosecutor show that the victim suffered serious injury or that a weapon was involved. Second-degree rape carries a sentence of 12 to 14 years and requires the state to prove that sex was forced and without consent. Most cases of acquaintance rape fall into this category. However, it is difficult to get a conviction in cases of acquaintance rape because it is difficult to prove that sex was forced. According to North Carolina law, lack of consent is not enough to convict. One district attorney is lobbying for a third-degree rape charge to make it easier to convict in acquaintance rape cases by proving the victims did not consent to sex. 10

The SBI reports the most frequent victim is an African-American female age 16 to 20. The most frequent place for rapes to occur is in the home of the victim.¹¹

In most reported rapes, the offender was known to the victim. The SBI reports that in 64.6 percent of all reported rapes in 1991 the offender was an acquaintance, relative or boyfriend of the victim. The percentages were similar in 1989.¹²

Table 16. Race and Age of N.C. Rape Victims - 1992

Caucasian	1,213	Age	Number	Percent
Women-of-color	1,154	10 and under	111	4.5
Indian	28	11-15	371	15.3
Asian/other	14	16-20	558	23.0
Unknown	9	21-25	456	18.8
		26-30	365	15.1
		31-35	233	9.6
		36-40	126	5.2
		41-45	80	3.3
		46-50	31	1.2
		51-55	12	0.5
		56-60	12	0.5
		61-65	13	0.5
		66-84	23	1.0
		85+	6	0.2
		Unknown	21	0.8

Source: N.C. State Bureau of Investigation.

Sexual assault is the term used to describe any offense involving sexual acts and can include rapes. As with DV programs, the N.C. Council for Women administers grants to sexual assault/rape crisis centers that provide director services, counseling and advocacy. These programs also provide support and counseling for family members and others close to victims. Many of these programs provide counseling for adult survivors of sexual abuse or incest. The state first appropriated funds for 14 sexual assault (SA) programs in fiscal year 1984-85. Fifty-one programs received \$14,150 each in fiscal year 1993-94, and 53 programs will receive \$20,000 per program in 1994-95. They reportedly served 5,948 new primary victims and 2,506 secondary victims for fiscal year 1992-93. Only 1.4 percent of the contacts for services to DV programs were males in fiscal year 1991-92.13 Fifty-five percent of the women were Caucasian, and 20 percent were women-of-color. The discrepancy in the law enforcement reports and local rape crisis programs reports characterizes the issue of underreporting. For an overview of the growth of state appropriations for sexual assault programs and the growth in the number of programs serving women in North Carolina, see Chart 15 on page 55 and Chart 16 on page 56.

Murder

In 1992, 169 women over age 15 were murdered in North Carolina, comprising 26 percent of the total murders. ¹⁴ Seventy-four were women of color, 43 were Caucasian women and the others were not categorized by race. Women most at risk are between ages 15 and 44 years. As with other forms of violence against women, the victims often know their assailants. The most common relationship is an acquaintance, husband or exhusband or boyfriend.

The FBI cites national statistics indicating 60 percent of murder incidents occur between men; in 18 percent of the cases, men kill women; in 16 percent of the cases, women kill men; and in 4 percent of the cases, women kill women. African-American men are both the most frequent victims and the most frequent perpetrators.

Sexual Harassment

Violence against women does not always imply physical violence. The effects of sexual harassment are violent in the sense that harassment can devastate a woman's self-esteem and threaten her economic stability. The legal definition of sexual harassment is unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when: (1) submission to such conduct is made explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; (3) such conduct has the purpose or effect of unreasonable interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment. Sexual harassment is a form of power used to control women and includes such behaviors as jokes, invitations, sexual remarks, non-verbal suggestions, patting, cornering or any other action in which the victim feels threatened.

Typically, women who are most dependent on their jobs are singled out for harassment. They are less likely to report incidents of sexual harassment because they fear they will be fired. It is a rational fear, for many women lose their jobs or are transferred when they complain.

Current events have increased awareness and precipitated an increase in the number of reports. This has prompted many companies to implement policies addressing the issue. The Equal Employment Opportunity Commission (EEOC) has jurisdiction over companies with more than 15 employees, but smaller companies are not covered by either federal or state laws. Despite the regulations, only a very small number of women who experience sexual harassment in the workplace report incidents to the EEOC. Some surveys have indicated that between 60 percent and 70 percent of all working women feel that they have been harassed at some time. As workers realize that some remedial action is available, case files have increased. In fiscal year 1984-85, 136 charges were filed in North Carolina and 4,669 nationally. In 1993, North Carolina had 308 charges filed, and 12,537 were filed nationally. Currently, the course of action following filing a complaint is cumbersome and often further victimizes the person who is the object of the harassment.

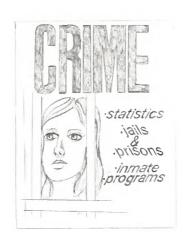
Current Legislation

As understanding of the pervasive nature of violence against women increases, the N.C. General Assembly has been responsive in its concern for women. Since 1989 the following laws have been passed relating to the safety of women:

- 1. A change in the "50B" statutes allows a person to obtain a protective order if the individual feels he/she is in danger of serious or immediate injury from a current or former intimate partner. Now, an individual may obtain such an order without the assistance of an attorney. This legal action, termed "pro se" (meaning one's self), costs \$55, although a petitioner may file an affidavit as a pauper to have the fee waived. (1989)
- 2. An extension of the warrantless arrest law in domestic situations frees law enforcement officers from obtaining a warrant to arrest if there is probable cause to believe an assault took place. (1991)
- 3. A stalking law allows police to arrest a person suspected of stalking if the victim has been threatened with injury or death, or the offender has been told to desist and does not. If there is a second or subsequent conviction for stalking the same person within five years of the original charge, the crime is punishable as a Class I felony. (1992)
- 4. A marital rape law states a party may be prosecuted for rape, even though the parties are living together in marriage. Previously, that circumstance was an absolute bar to the charge of rape. (1993)

Endnotes

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- 2. Handsnet Forum, Bureau of Justice Statistics. May 9, 1994.
- 3. U.S. Senate Committee on the Judiciary, "Violence Against Women: The Increase in Rape in 1990," 102nd Congress, First Session, March 21, 1993. Washington: 1993.
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- 7. N.C. Council for Women Statistical Data. Raleigh: 1992.
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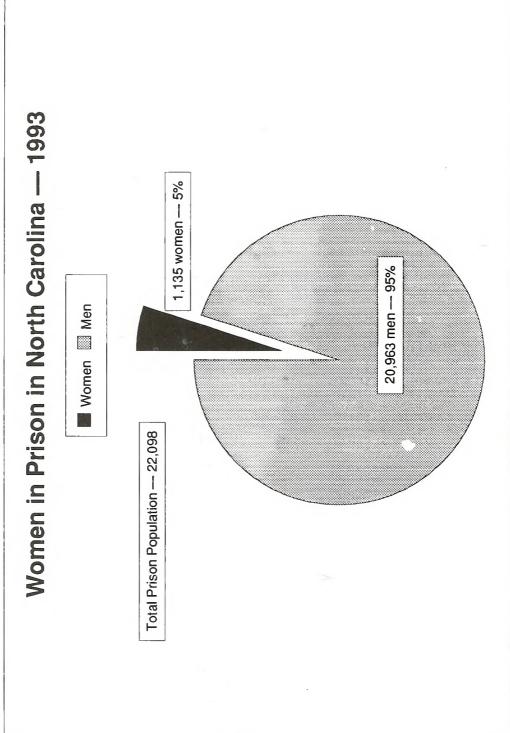
Women in Prison

The number of women being incarcerated is steadily increasing. The Women's Movement, drugs, more violent crime, judges being less "chivalrous," and the mandatory sentencing laws are all cited as reasons for the increase.¹

Women, as of December 31, 1993, represented 5 percent of inmates in North Carolina state prisons -- 1,135 of the 22,098. See Chart 17 on the following page. The state has six female correctional facilities which can house approximately 1,180 residents. The largest is the North Carolina Correctional Institution of Women in Raleigh, the only maximum security prison for women in the state. It accommodates 684 inmates. The other five facilities are Black Mountain Correctional Center for Women, 51; Rocky Mount Fountain Correctional Center for Women, 295; Raleigh Correctional Center for Women, 104; Wilmington Residential Facility for Women, 26; and the Charlotte E.C.O. Residential Facility for Women, 20.

Deborah Robinson, director of community education with Interact, works with women in the Raleigh facility. She profiles an incarcerated woman as a victim of abuse as a child, later involved in an abusive relationship to escape her family. A woman prisoner is often a mother who is clinically depressed because she is separated from her children. She is often illiterate, poor, has few job skills, is a woman-of-color, and has a history of drug and alcohol abuse.

Eighty percent of all imprisoned women are mothers. Of these mothers, 83 percent are single parents who are the primary caretakers for their children.²



Source: N.C. Department of Correction Statistical Abstract, Division of Prison. December 31, 1993.

An alternative to incarceration for non-violent women with children has been addressed by the General Assembly through its funding of Summit House, which has three facilities located in Greensboro, Charlotte and Raleigh. Summit House provides the guidelines and structure to help women in a variety of basic skills including personal finance, child rearing, and household management. Residents are required to earn their GED if they do not already have a high school diploma and then proceed to gain vocational training.

Table 17. Profile of Women in Prison in North Carolina - 1993

Type of Crime Committed	Caucasian	African American
Assault		
Homicide (Felony)	107	88
Robbery (Felony)	21	76
Sexual Assault (Felony)	14	8
Other:		
Misdemeanor	0	10
Felony	14	51
Public Order		
Drugs:		
Misdemeanor	1	3
Felony	58	215
DWI (Misdemeanor)	18	2
Traffic (Misdemeanor)	10	0
Other:		
Misdemeanor	3	6
Felony ·	10	15
Property Crime		
Burglary (Misdemeanor)	1	1
Breaking & Entering (Felony)	34	28
Larceny & Auto Theft:		
Misdemeanor	5	30
Felony	25	42
Check Forgery & Fraud:		
Misdemeanor	7	8
Felony	65	91
Other Property:		
Misdemeanor	0	2
Felony	3	12

Source: N.C. Department of Correction, Division of Prisons, Statistical Abstract, 1993.

In 1993, 3,058 women were admitted to prison: 1,042 Caucasian women, 1,933 African-American women, and 83 women of other races. This was an increase over 1992 when there were 2,743 women admitted, with women being 9 percent of the total 30,839 prison admissions. Women comprised 21 percent of the total 88,376 probations and 7 percent of the total 18,188 parolees in 1993.³

The median time served by all inmates, male and female, for 1993 releases was 8.2 months for felons and 1.0 month for misdemeanors. Among inmates released in fiscal year 1988-89, 40 percent returned to prison in North Carolina within three years.⁴

Most women who committed murder claimed that they acted in self-defense against an abusive partner. However, these women often have little knowledge of the self-defense laws. Usually they take the advice of their court-appointed lawyer and plea bargain instead of taking their case to court. Trying self-defense cases in court increases the likelihood of conviction for a lesser crime. Thus, women who murder abusive partners and plea bargain tend to spend more time in prison than women who defend their actions as self-defense.⁵

An increase in illegal drug use, especially crack cocaine, has contributed to a rise in predatory violent crimes committed by women. In addition to this, N.C. Department of Correction officials must cope with crack-addicted babies born to inmates and the rise in HIV-infected inmates. Between 60 percent and 70 percent of the inmates at Women's Prison in Raleigh have committed either a drug-related or violent crime. This dramatic rise in drug-related crime is alarming to the Department of Correction.

These drug-related and violent crimes carry longer prison sentences than non-violent crimes. Although drug-related violent crime is a small percentage of all crime committed by women, it is the fastest growing area of illegal activity for women.

The dramatic increase in the number of women incarcerated may be partially explained by a societal move toward equal punishment for equal offenses. In an effort to make sentencing more equitable, state legislators have enacted mandatory sentencing laws which deny judicial discretion in sentencing. This makes it more difficult for women acting violent in self-defense to be granted any leniency in sentencing.⁶

Rehabilitation Programs

The correctional facilities across the state have a wide range of rehabilitation programs designed to help women become effective mothers and productive members of society after their prison terms. An example of services provided at the North Carolina Correctional Institute for Women (NCCIW) through the Social Work Section include:

- 1. MOTHERREAD PROGRAM: The program is designed to enhance parent/child relationship by relating through children's story books, coordinated with Motherread instructors.
- 2. LONG TERMERS' FAMILY DAY: The program is designed to enhance family support of the long-term offender. Families are encouraged to come and bring a meal and spend the day with the long termer. This program is offered once a year in addition to regularly scheduled weekly visitation.
- 3. LONG TERMERS' VOLUNTEER ACTIVITY: Community volunteers visit each month to provide the opportunity for long termers to have consistent community contact. This activity is designed to provide learning opportunities which address issues important to the long termer. The long termer assists in identifying the areas of interest to be addressed by the volunteer. Volunteers bring in community experts to offer workshops in areas such as self-esteem, self-assertiveness, parenting, etc.
- 4. MATCH (Mothers and their Children) of North Carolina provides mothers who are incarcerated and their children with the support and resources necessary to maintain and strengthen family relationships and to help break the cycle of incarceration with these at-risk families.
- 5. MINIMUM CUSTODY SUPPORT GROUP: An intense, ongoing support group for inmates who have become institutionalized. This group addresses issues of dependency, agoraphobia, anxiety and any other negative feelings associated with being institutionalized.

- 6. PREGNANT INMATE VOLUNTEER ACTIVITY: Community volunteers come each month to meet with the pregnant inmates. These volunteers offer support and counseling services.
- 7. SUPPORT GROUP FOR PREGNANT INMATES: Education is provided in prenatal and postnatal care, as well as in developing parenting skills. This is coordinated through Wake County Health Department instructors.
- 8. HEALTH AWARENESS CLASSES: Long termers, new and pregnant admissions are the targeted groups at this time. This is coordinated through Wake County Health Department instructors.
- 9. AIDS SUPPORT GROUP: Holistic approach addresses all areas of concern for the AIDS victims and their families.
- 10. EATING DISORDER GROUP: Anorexia/bulimia is a common phenomenon among female offenders. This group offers support and education to dispel myths and misconceptions inherent in these disorders.
- 11. STEP SYSTEMATIC TRAINING FOR EFFECTIVE PARENTING: STEP is offered by different instructors for various units.

The NCCIW in Raleigh, in conjunction with the N.C. Department of Commerce, has a program which assists the North Carolina Travel and Tourism Office. Inmates assist the Travel and Tourism Office by operating phone banks and coordinating bulk mail projects. The program, which uses specially trained long-term inmates, has been an extraordinary success.

In other areas of the state, the Rocky Mount minimum security facility for women developed an educational program with the local community college which helps inmates earn their GED and become certified in areas of office management, nursing and home economics. The Black Mountain Center for Women sponsors a program with local churches and prison fellowship where inmates repair and renovate the homes of the elderly. The correctional facilities in Wilmington and Charlotte have evolved into half-way houses for women and have had success in helping women regain their self-esteem and lead successful lives once they leave the penal system.

Endnotes

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- 4. Thomas E. Sutton, Statistician II, Office of Research and Planning, *Research Bulletin*, Issue No. 36, March 1, 1994.
- 5. Jenny Lancaster, N.C. Department of Correction, Interview, Paige Hall, Public Health Analysis of Partner Homicide in North Carolina, Department of Health Behavior and Health Education, School of Public Health, UNC-Chapel Hill.
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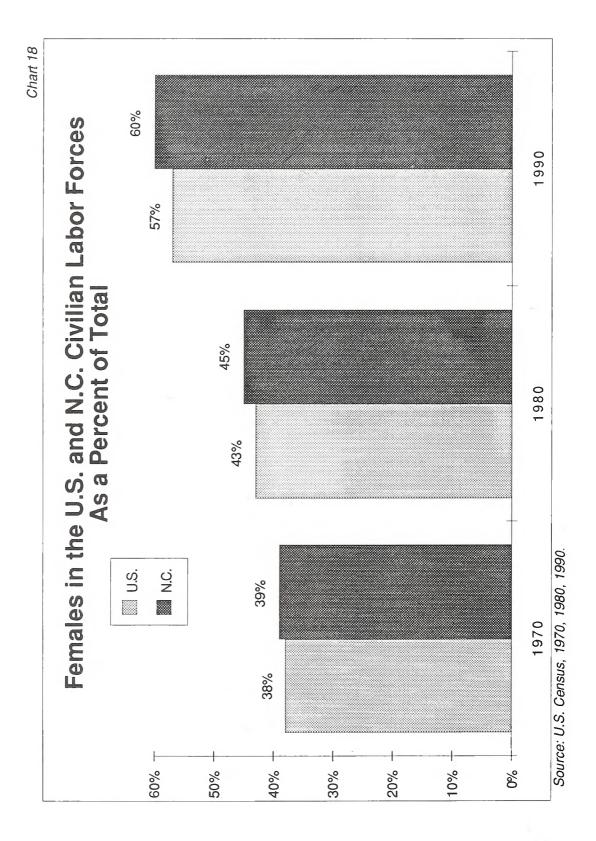


Women and Employment

Although North Carolina women have been a part of the paid labor force for decades, they have steadily and significantly increased their participation rate over the years. Today dramatic numbers of women are in the work force, strongly influencing the economic health of our state and nation. Women work for the same reasons men work: to support themselves, to support a family, and to achieve a sense of personal fulfillment. Women in the work world have advanced in many ways; however, they still are thwarted by a variety of concerns including unequal pay, the "glass ceiling," employment concentrated in low-paying positions, growing numbers of displaced homemakers, and child care concerns for the large number of working mothers in North Carolina.

Women in the Labor Force

In both the state and the nation, women outpaced men in labor force participation for the first time in 1990, and continuing a trend, North Carolina had a greater percentage of female workers than the country as a whole. According to the latest census figures, approximately 1.6 million females are in the North Carolina civilian labor force, representing 60 percent of the state's total labor force of 2.7 million. The number of females in the work force has grown steadily in both the state and the nation, but in each of the last three censuses, the growth in numbers of North Carolina female workers has forged ahead of their counterparts nationwide. In 1990 North Carolina's female workers made up 60 percent of the state's workers, while nationally females represented 57 percent. In 1980 women made up 45 percent of the state's work force and 43 nationwide. Figures in 1970 were 39 percent, state, and 38 percent nationally. See Chart 18.



Because women make up the majority of the total labor force, it is not surprising that most North Carolina women, age 16 and over, are in the labor force. See Table 18. Approximately 59 percent of the state's female population is in the work force. The rates for women are close among all races: Hispanics, 62 percent; African Americans, 61 percent; Caucasians, 59 percent; and "Other," 58 percent. (Hispanic is an ethnic heritage, not a race, according to demographic definition; therefore, there may be Caucasian Hispanics, African-American Hispanics, etc.)

Table 18. N.C. Civilian Labor Force Percent of Population Participation ¹ - 1993

	Total	Caucasian	African American	Other	Hispanic ²
% Female	59	59	61	58	62
% Male	74	75	69	79	78

Source: Current Population Survey, 1993.

Men of all races have greater participation rates than any one race of women. "Other" men are the largest segment in the labor force with 79 percent of that category participating. "Others" are American Indian, Eskimo, Asian and Pacific Islander. Hispanic men have the second highest participation rate at 78 percent, followed by Caucasian men at 75 percent and African-American men at 69 percent.

The make-up of the labor force mirrors the state's population statistics. Of all female workers in the state, 74.4 percent are Caucasian, 24.2 percent are African American, and 1.4 percent are "Other." Some 7.2 percent of the North Carolina female work force in 1993 identified themselves as Hispanic. See Table 19.

¹ Represents all civilians working, with job but not at work, unemployed and looking for work, and unemployed on layoff.

² May represent dual counting.

Table 19. N.C. Civilian Labor Force By Sex as a Percent of Total by Race ¹ - 1993

	Caucasian	African American	Other	Hispanic ²
% Female	74.4	24.2	1.4	7.2
% Male	77.2	20.3	2.5	8.1

Source: Current Population Survey, 1993.

The stereotype of the "little woman" working for "pin money" or to "supplement" the family income is not reinforced by the actual statistics about marital status. Approximately 44 percent of North Carolina's working women are single, divorced, separated or widowed, according to the 1993 Current Population Survey, and are working to support themselves and their families. Twenty-three percent of the female work force is single; 11 percent, divorced; 6 percent, separated; and 4 percent, widowed. See Table 20.

Table 20. N.C. Employed Persons by Marital Status As a Percent of Total - 1993

	Married	Divorced	Single	Widowed	Separated
% Female	56	11	23	4	6
% Male	62	6	27	1	4

Source: Current Population Survey, 1993.

The 54 million women working in the United States in 1992 fell into two categories: three-quarters working full time and one-quarter working part time. In North Carolina 22 percent of females in the work force worked part time in 1990.

¹ Represents all civilians working, with job but not at work, unemployed and looking for work, and unemployed on layoff.

² May represent dual counting.

Unemployment Rates

Nationally the unemployment rate at the time of the 1990 census was at 6.3 percent. For women nationwide, the unemployment rate was 6.2 percent; for men, it was 6.4 percent.

The 1990 U.S. census showed that females in the North Carolina labor force have a higher unemployment rate than males, 5.5 percent and 4.2 percent respectively. Although females have a higher unemployment rate than males in North Carolina, they are still below the national unemployment rate for women.

Unemployment rates are higher among minorities. According to the 1993 Current Population Survey for North Carolina, the unemployment rate for African-American females age 16 and over was 10.7 percent, compared to 4 percent for Caucasian women. The rates for Hispanic women and "Other" women were 11.2 percent and 9.3 percent, respectively. See Table 21.

Table 21. Employment Status Of N.C. Women by Race/Ethnicity - 1993

	Caucasian	African American	Other	Hispanic ¹
Employed	2,496,043	680,175	60,986	41,264
Unemployed	105,117	81,323	6,232	5,188
Civilian Labor Force	2,601,160	761,498	67,218	46,452
% Unemployment	4.0	10.7	9.3	11.2

Source: Current Population Survey, 1993.

Working Mothers

North Carolina has the largest percentage of working mothers of any state in the country. The Bureau of Labor Statistics reported in 1986 that if mothers did not work, labor force demands could not be met. By implication, this large force of working mothers' primary concerns (child care, family benefits and wages) command careful

¹ May represent dual counting.

consideration. Working mothers need affordable, available child care facilities.² With the average cost per child per week for North Carolina day care at \$72, a woman's available disposable income for other necessities is drastically reduced.³

The 1990 census placed 67 percent of women (married and unmarried) with children under 6 in the work force, compared to 60 percent nationally. For women with school-age children, 80 percent were in the labor force, compared to 75 percent nationally. By comparison, in 1980 only 58 percent of women with children under 6 were in the work force and 70.3 percent of women with school-age children were in the work force in 1980. See Table 22.

Table 22. Working Mothers - 1990

	North Carolina	United States
With children under 6	67%	60%
With school-age children	80%	75%

Source: 1990 U.S. Census,

Currently in North Carolina, 61.5 percent of all children under 6 years of age have either both parents or their only parent in the labor force.⁴

Low wages, jobs offering no health benefits, and the cost of child care combine to make the efforts of mothers wanting to leave public assistance an overwhelming and frequently impossible task.

Income and Benefits

In North Carolina, women earn 68 cents for every dollar men earn, contributing to the poverty level of many women and children. Although the pay gap between white women and men appears to be narrowing, it is important to note that the substantial change is due in part to men's wages not rising, rather than women's increasing. An Economic Policy Institute study indicates that while women's wages have increased for those with some college, men's have increased only for those with education beyond the traditional four years of college.⁵

The wage gap widens as women get older. Younger, educated women earn better incomes than their counterparts of older generations. White women between the ages of 20 and 44 with no career interruptions are paid 91 percent of men's earnings.⁶

According to the Current Population Survey of U.S. households conducted by the Bureau of the Census for the Bureau of Labor Statistics, the mean income in 1992 for a U.S. household headed by a female with children was \$18,126. Males with the same circumstances earned \$28,889. The mean income for a married couple with children was \$51,025. If broken down by race, the mean income for a white female-headed household with children under 18 is \$19,900; African-American, \$14,727; and Hispanic, \$15,444. The mean income for a white male-headed household with children under 18 is \$30,881; African-American, \$19,614; and Hispanic, \$19,985.

Traditionally female occupations pay less than traditionally male jobs with similar skill requirements.⁷ For example, in the early part of this century, jobs as bank tellers were high status, well-paid positions filled primarily by men. As the field has shifted to become dominated by women, wages and status of bank tellers have dropped. Banking ranks third in the percentage of women employed, but 46th out of 52 categories in hourly earnings.⁸ In most cases of occupational job segregation by race and sex, work traditionally held by women is low-wage, part time or both.

Some economists believe that the pay gap is the result of women working fewer hours per week than men and having fewer years in the labor force because of raising children. A recent national study found that women who interrupted careers for family reasons never reached the earning capacity of female workers who stayed on the job. However, among women who worked full time with no extended leave, there is still a considerable pay gap between comparably educated men and women. For year-round, full-time workers, the 1992 North Carolina median income was \$10,774 for women and \$20,654 for men. 10

Women's Occupations

A study from 1986 points out that women find employment in low-paying positions, for instance, in the service industry. The majority of full-time working women

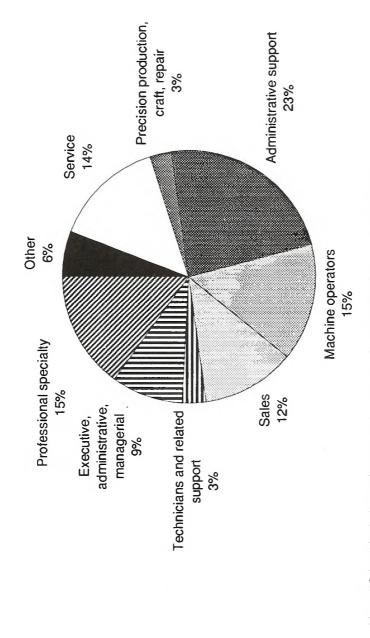
hold jobs in industries that pay less than the average lower-income household budget in the United States. To put it another way, women's wages may lift a family out of poverty but are not sufficient to support a family.

Information from the 1990 U.S. census shows that women in North Carolina continue to be greatly underrepresented in many occupations. The notion that women entering the market take jobs that "should be men's" is not borne out by the actual jobs held by women. In 1992-1993 the N.C. Council for Women's survey of women in non-traditional jobs identified barriers for women trying to enter and prosper in these fields. The preliminary results confirm that counseling, peer influence, workplace acceptance by both employers and other employees, and society's attitudes, all contribute to keeping women in traditional fields. The reason for looking at occupational segregation so closely is that jobs dominated by men pay substantially more than jobs dominated by women. This is true even when comparing jobs that require equivalent education levels. 11

Latest census information reveals that 23 percent of all working women are in administrative support positions (clerical). See Chart 19 on page 79. Fifteen percent of working women are machine operators, assemblers and inspectors, including textile workers. The smallest percentage of all working women work in the protective service; farming, forestry and fishing; transportation-related occupations; and private households. However, women of color have made significant advances in pay and position in the protective services area.

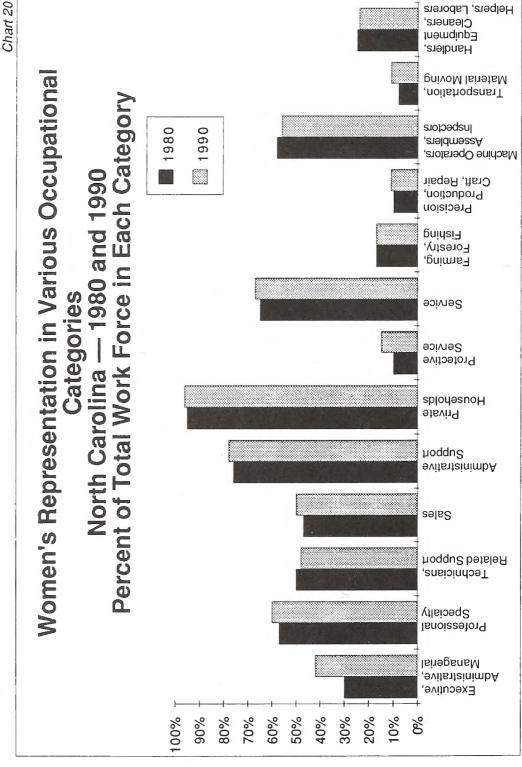
Women in executive, administrative and managerial occupations showed the highest gain. See Chart 20 on page 80. In 1990, they represented 42 percent of executive, administrative and managerial positions, up from 30 percent in 1980. These positions include personnel management, finance management and food service management. Some women are breaking through the "glass ceiling," the invisible barrier of sexism preventing women from reaching top-level positions. According to the 1990 census, women represent 20 percent of all chief executives and general administrators in North Carolina. African-American women make up only 4 percent of this group.





forestry, fishing, transportation/material movers and handlers, equipment cleaners. Note: "Other" includes: private service occupations, protective services, farming,

Source: U.S. Census, Detailed Occupations of the Civilian Labor Force By Sex and Race, North Carolina, 1990.



Source: U.S. Census, Detailed Occupations of the Civilian Labor Force By Sex and Race, North Carolina, 1980, 1990.

In the professional specialty division, women represent approximately 60 percent of all workers, including teachers, social workers and nurses. Nationally, nursing is the one occupation in which women earn more than men. Women, who represent 93.5 percent of all nurses in the United States, earn 4.7 percent more than men. In 1990, 95 percent of all registered nurses in North Carolina were females. The average wage for nurses in North Carolina is \$14.40 per hour. In virtually every other profession in the health field (therapists, pharmacists, scientists, etc.), women earn less than men.

The earnings gap between the sexes is widest for physicians. Women physicians (25 percent of all physicians nationwide) make only 72.2 percent of men's weekly earnings. In North Carolina, women comprise 18 percent of the physician population. Women are grossly underrepresented in other well-paid professional specialty fields such as law, engineering and architecture. For example, women represent 8.7 percent of engineering positions nationwide, and earn 85.6 percent of men's earnings. In North Carolina 10 percent of all engineering positions are held by females. Women are approximately one-third of all university teachers, but earn only 75 percent of what their male counterparts earn. (For a closer look at teaching, see the section on education.)

In the technicians and related-support division, North Carolina women are nearly half of all workers. However, their representation is not uniform across all occupations in that field. Women are the majority of technicians in the health-care field but have little representation in engineering-related fields. In most technical occupations women make 20 percent to 25 percent less than men.

In the sales occupations division, women and men are about equally represented statewide. However, women are underrepresented in high salary sales positions, such as wholesaling, insurance, car sales, and sales management. Women in sales occupations are typically concentrated in low-paying, no-benefit occupations such as retail sales and cashiers. In the securities and financial services sales area nationwide, women are 32.4 percent of the salespeople and earn only 53.8 percent of what men earn. ¹⁹ In North Carolina the number of women in securities and financial services sales is also 32 percent of the work force.

In the clerical and administrative support services division, women are an overwhelming majority in virtually every occupation. More than 230,000 North Carolina

women hold jobs as secretaries, bookkeepers, clerks, receptionists, data-entry keyers, administrative support, typists and computer operators. Even in these low-wage jobs where women greatly outnumber men, jobs dominated by women still earn 18 percent to 22 percent less than similar jobs dominated by men.²⁰

In the machine operators, assemblers and inspectors division, women are over half of all workers.²¹ Women are mostly employed in the textile industry. They work primarily as textile machine operators and production inspectors, averaging between \$6 and \$8 per hour.²² Nearly all other types of machinery are operated by men. The average hourly wage for these other machine operators in the state ranges from about \$8.75 to \$14.23

Women are almost 25 percent of the handlers, equipment cleaners, helpers and laborers division, but their concentration is in the hand packers and packagers occupations (70.2 percent) which in North Carolina average under \$6 per hour.²⁴ Men dominate all other jobs within this division. For example, 95 percent of construction laborers are men; however, the average salary for this job is \$8.81 per hour.²⁵

Women make up the majority of the workers in the low-paying private household division and the service division. The private household division, which is 96 percent female, is composed of cleaners and servants, child care workers and other household workers. Women make up 67 percent of the North Carolina workers in the "Other" services division. Under this category, 99 out of 100 dental assistants are female and 85 out of 100 individuals employed as wait staff are female. Women also dominate the nursing aides, orderlies and attendants category with 88 percent, as well as maids and housemen with 84 percent. Average salaries for women in this occupational division range from \$2.66 an hour for wait staff to \$10 for dental assistants.

Women-Owned Businesses

North Carolina women-owned businesses increased by approximately 72 percent between 1982 and 1987, from 67,374 to 93,532, thereby enabling women to have greater control over their time and workplace conditions, as well as to utilize their skills. The national rate of growth for women-owned businesses during the same period was 63

percent.²⁶ Traditionally, most women-owned businesses were concentrated in the retail trade and services sector, but during the 1980s strong growth developed in construction, manufacturing and wholesale trade businesses. Figures collected by the census every five years indicate that total receipts for women-owned U.S. businesses rose from \$98.3 billion in 1982 to \$278.1 billion in 1987 and in North Carolina from \$1.9 billion to \$6.8 billion.²⁷

Women and the Military

Military service represents a viable option for women seeking a career. Nationally, the number of women on active duty in all military branches increased from 8.9 percent in FY 1981 to 10.8 percent in FY 1990, a 2 percent increase. The U.S. Air Force, with 14 percent, has the highest percentage of women officers and enlisted personnel, while the U.S. Marine Corps, with 4.9 percent, has the smallest.²⁸

During the 1980s the military opened many skill areas and positions to women. All branches of the military combine for an average of 87 percent of skill areas open to women and 62 percent of military positions open to women. The Air Force has the highest percentage of skill areas and positions open to women, 99 percent and 97 percent respectively, and the Marine Corps has the lowest, with 80 percent and 20 percent respectively.²⁹

In North Carolina, 10,800 women were serving in the military in 1993, representing 9 percent of the total military population of 120,000. In 1993 women made up approximately 5 percent of North Carolina's veteran population of 716,100.³⁰

Displaced Homemakers

A special category of workers is the woman who has spent much of her adult life caring for her family. If she was ever in the paid work force, it was not as a career employee. The loss of the primary wage earner, either through divorce, death or disability, changes her economic status and forces her to become the primary wage earner. The National Displaced Homemaker Network (now called Women Work! The

National Network for Women's Employment) estimates that North Carolina has over 413,345 women who must make the transition from home to work in order to provide themselves with a living wage. The number represents 15 percent of all women age 16 and over in North Carolina. National figures claim 17.8 million women as displaced homemakers, or one in six American women.³¹

Forty-two percent of America's displaced homemakers live in poverty, while the poverty rate for all U.S. families is 11 percent. More than 90 percent of displaced homemakers with a child under 2 years of age live in or close to poverty.³²

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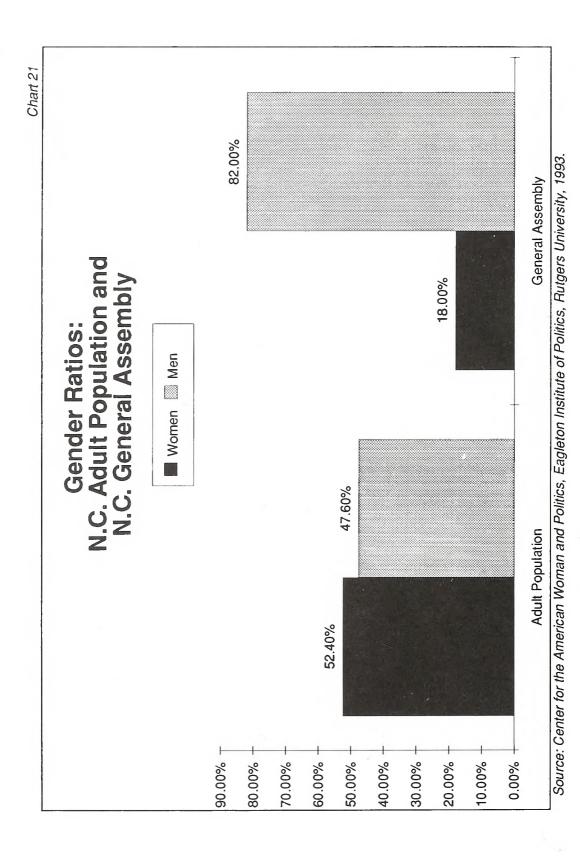
Women and Politics

In 1980 more women than men went to the polls to vote. Then, in the 1992 general election more women than ever before voted. Women accounted for 53 percent of all voters. Because of the large turnout by women in the 1992 election, the media termed it "The Year of the Woman in Politics." ¹

Women comprise 10 percent of the United States Congress, 20 percent of all state legislatures, and 18 percent of the nation's mayors. Forty-two states have elected a woman to statewide executive offices. North Carolina is not one of them.

In 1994, women represent 52.4 percent of the total adult population in North Carolina, but only 18 percent of North Carolina's General Assembly: seven senators and 24 representatives. See Chart 21 on the following page. As a result of the November 1994 election, women will now comprise 16 percent of the General Assembly: six senators and 22 representatives. There were two female races pending at the time of publication, one in the House and one in the Senate.

Two women have represented North Carolina in Congress. Eliza J. Pratt (D) was elected to fill the vacancy caused by the death of William O. Burgin and served from May 25, 1946, to January 3, 1947.² Eva Clayton (D), elected from the 1st Congressional District in 1992, is the first African-American woman to serve from North Carolina.



State Government Appointees (1994)

In N.C. state government, three women serve as executive department secretaries in Administration, Cultural Resources and Revenue. Two women serve as deputy secretaries in Cultural Resources and Revenue. Six women serve as assistant secretaries in Administration; Commerce; Environment, Health and Natural Resources (3); and Human Resources. As of August 1994, the Governor's Office had appointed over 525 women to boards and commissions.

Local Offices

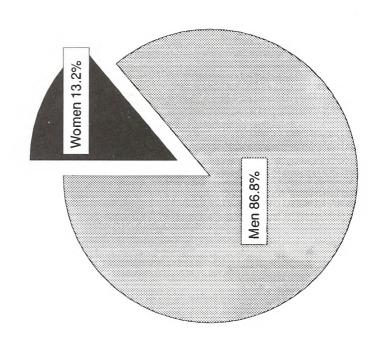
North Carolina municipalities elected 463 women in 1993 to serve on town boards and city councils, 17 percent of all municipal positions. Women serve as mayors in 69 municipalities; 11 serve as mayors pro tempore.³ Seventy-four women county commissioners serve in 49 of North Carolina's 100 counties, out of a total 551 seats (13.2 percent).⁴ See Chart 22 on following page.

Judiciary

Susie Marshall Sharp was the first woman appointed to the North Carolina Superior Court (1949). She was later elected chief justice.

North Carolina has 32 women serving as district court judges, five as superior court judges, one on the state Supreme Court and one on the Court of Appeals.

Women's Representation on N.C. County Commissions



Source: N.C. Association of County Commissioners.

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